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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. Exploring the well-being of foster children of parents with substance abuse problems in Family Dependency Treatment Courts.

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| Citation: | Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2575), 0419-4209 (2012) |
| Author(s): | Howes, Barbara M |
| Institution: | Howes, Barbara M.: Western Michigan U., US |
| Language: | English |
| Abstract: | The aim of this three-paper format dissertation is to explore how the well-being of foster children of parents with substance abuse problems is defined and promoted through Family Dependency Treatment Courts (FDTC) within the context of the Adoption and Safe Families Act (ASFA). The benefit to the author of the three-paper method is the task of submitting the findings of the study for publication is eased as the dissertation contains three stand-alone articles. A drawback for the reader of the three-paper method is that there is redundancy in reading the same sections in each paper. The reader is encouraged to keep in mind that some information may be redundant when read as a whole document. The first paper is a policy analysis of ASFA. It specifically aims to analyze the mandates of ASFA as they pertain to the well-being of foster children of parents with substance abuse problems. One approach to implementing the mandates of ASFA is through Family Dependency Treatment Courts (FDTC). FDTCs serve parents with substance abuse and dependency problems that have contributed to the removal of their children from their care. Papers two and three report the findings of a grounded theory study conducted in FDTCs. Paper two aims to define well-being, and postulates a theory to that effect, titled Emotional Permanence (EP). Paper three postulates a theory of Fostering as a basic social process that FDTC interdisciplinary teams use to promote the well-being of parents with substance abuse and dependency problems and their children. Although each paper is independent, the three are connected by the common theme of the well-being of foster children of parents with substance abuse problems. (PsycINFO Database Record (c) 2012 APA, all rights reserved) |
| Publication Type: | Dissertation Abstract |
| Subject Headings: | *Drug Abuse *Family *Foster Children *Parents *Well Being Adjudication Grounded Theory Treatment |
| Source: | PsycINFO |

2. From strong Black woman to womanist: An afrocentric approach to understanding perspectives of strengths, life experiences, and coping mechanisms of single, African American custodial grandmothers.

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|---------------------|---|
| Citation: | Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2575), 0419-4209 (2012) |
| Author(s): | Jackson, Ozie White |
| Institution: | Jackson, Ozie White: U Utah, US |
| Language: | English |
| Abstract: | As there is an absent generation of parents due to the current ills of society such as drug and alcohol addictions, the AIDS/HIV epidemic, parental neglect and abandonment, incarcerations, mental illness and the deaths of parents, there will be an absent generation of grandparents - grandmothers in particular - for the present generation of grandchildren when they, themselves, become parents. State and other agencies will become more overburdened with assuming the care for the children of this present generation of grandchildren. This descriptive and exploratory study was designed to explore the life |

experiences, values, beliefs, coping mechanisms, and strengths of single, mostly low-income, African American grandmothers who are raising their grandchildren. These custodial grandmothers are raising their grandchildren without either parent in the home. The grandmothers live in an urban, inner city area of Las Vegas, Nevada, in an area known as the Westside. Data were collected through individual interviews and focus group discussions. The study found that many of the grandmothers prefer not to accept needed assistance from social services agencies or engage with helping professionals because of their belief that no one is interested or concerned about their perceptions; their experiences, values, and beliefs; how they manage to care for the grandchildren; or their strengths. They believe that they do not have a voice in policies and procedures that affect them and their grandchildren. To assist themselves, they agreed to adopt the methods of slave women where many had to raise their children without the benefit of a spouse or other assistance. The participants in this study were willing to engage with each other as a strengths-based, self-help support group within their community, offering each other their strengths, suggestions, and solutions to what they perceive as problematic. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Blacks](#)
[*Coping Behavior](#)
[*Grandparents](#)
[*Human Females](#)
[*Life Experiences](#)
[Child Custody](#)
[Grandchildren](#)
[Incarceration](#)
[Mental Disorders](#)
[Parents](#)

Source: PsycINFO

3. Exploring the help-seeking/helping dynamic in illegal drug use.

Citation: Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2244), 0419-4209 (2012)

Author(s): Polych, Carol Felicity

Institution: Polych, Carol Felicity: U Toronto, Canada

Language: English

Abstract: Heuristic qualitative research techniques (Moustakas, 1990) were used to explore the dynamic of the help-seeking / helping relationship in illegal drug use from the perspective of the professional. Six professionals, expert in helping people living with an addiction, shared their opinions and insights, analyzed problems, explained the rewards, and made recommendations for improvement, based on their own practices within the health care and social services systems. These professionals identify stigma as a major barrier to the provision of quality care in addictions, and analysis shows that a cultural predilection for scapegoating underlies the application of stigma. The many layered social purposes served by the designation of certain substances as illegal and the utility of scapegoating to hegemonic, vested interests is surveyed. This thesis reviews the true social costs of addictions, the entrenched and enmeshed nature of the alternate economy, and the many above ground institutions and professions sustained by the use of drugs designated as illegal. Prohibition and imprisonment as a response to illegal drug use is exposed as costly, inhumane, dangerous, and overwhelmingly counterproductive in terms of limiting harm from illegal drug use. A recent example of drug prohibition propaganda is deconstructed. Consideration is given to the role of the Drug War as a vehicle to accelerate social creep toward a fragmented self-disciplining surveillance society of consumer-producers in the service of economic elites. Classism is brought forward from a fractured social ground characterized by many splits: sexism, racism, ageism, able-ism, size-ism, locationism, linguism, and others, to better track the nature of the social control that illegal drugs offer to economic elites. The moral loading that surrounds illegal drug

use is deconstructed and the influence of religion is presented for discussion. The primitive roots of human understanding that endorse the ritual Drug War and its supporting mythology, leading to the demonization of illegal drugs and the people who use them, are uncovered. Direction is taken from Benner and Wrubel's Primacy of Caring (1989) and other leaders in the professions as a means to move practitioners away from their roles as agents of social control into a paradigm of social change. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Drug Abuse](#)
[*Drugs](#)
[*Group Dynamics](#)
[*Help Seeking Behavior](#)

Source: PsycINFO

4. Predictors of young adults' well-being: A comparison of longitudinal and cross-sectional analyses.

Citation: Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2265), 0419-4209 (2012)

Author(s): Sun, Huaping

Institution: Sun, Huaping: U Arizona, US

Language: English

Abstract: This study was designed to explore the association between diet and nutrition, physical activity, substance use, delinquent behavior, self-esteem, religiosity, relations with parents, and well-being among young adults, considering gender as a moderating variable. I used the data from Add Health to conduct both longitudinal and cross-sectional analyses. The longitudinal analysis revealed that high self-esteem and religiosity during adolescence positively predicted young adults' well-being, that religiosity and good relations with parents during adolescence protected young adults from drug use, and that good relations with parents during adolescence protected young adults from property crime. The positive influence of physical activity during adolescence on well-being and the protective effect of religiosity during adolescence on property crime were particularly for young men; and the positive influence of good relations with parents during adolescence on well-being was particularly for young women. The cross-sectional analysis indicated that physical activity, high self-esteem, and good relations with parents during young adulthood positively predicted young adults' well-being, that religiosity during young adulthood protected young adults from drug use, and that high self-esteem during young adulthood protected young adults from property crime. The protective effects of good relations with parents during young adulthood on drug use and property crime were particularly for young men. Also, the cross-sectional positive effect of high self-esteem on well-being was significantly greater for females than for males. Comparisons of the longitudinal and cross-sectional analyses showed that self-esteem had a greater impact on young adults' well-being in cross-sectional than longitudinal analysis, and that the protective effect of religiosity on drug use was greater in longitudinal than cross-sectional analysis, but for males only. Implications of the findings, limitations of the study, and future research directions were also discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Parents](#)
[*Physical Activity](#)
[*Religiosity](#)
[*Self Esteem](#)
[*Well Being](#)
[Diets](#)
[Drug Usage](#)
[Nutrition](#)

Source: PsycINFO

5. Prevalence and correlates of Internet addiction in undergraduate students as assessed by two different measures.

- Citation:** Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2264), 0419-4209 (2012)
- Author(s):** Schoenfeld, Daniel
- Institution:** Schoenfeld, Daniel: State U New York at Albany, US
- Language:** English
- Abstract:** The current study addressed some of the methodological shortcomings of previous studies on internet addiction. The main purpose of the study was to determine if two different internet addiction assessments would identify the same individuals as addicted to the internet. A total of 224 undergraduate internet users were surveyed using a stratified sampling plan based on the proportional allocation technique to procure as diverse a sample as possible. The assessments used were Young's Internet Addiction Test (IAT), Caplan's Generalized Problematic Use Scale (GPIUS), a demographic questionnaire, and a reasons-for-use questionnaire. Results showed that about 0.9% of the sample could be considered addicted to the internet according to both the IAT and GPIUS, which is a smaller percentage than found in previous studies. There were too few participants identified as addicted to the internet to determine if these two assessments identified the same individuals as addicted, however, it was shown that over a third of the sample was identified as "at risk" for addiction by one assessment and not the other. These results lead to the conclusion that the assessment measure used is of extreme importance when diagnosing internet addiction. Also, more robust sampling procedures may lead to fewer internet addicts identified, which could be a more accurate reflection of internet addiction in the target population. Regression results indicated that demographic and psychological predictor variables could more successfully explain the variance in IAT scores over GPIUS scores, although a similar pattern of direction and effects were shown for both criterion variables. Hierarchical regression revealed that the demographic variable "age" may be particularly important when attempting to predict internet addiction scores. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
- Publication Type:** Dissertation Abstract
- Subject Headings:** [*College Students](#)
[*Epidemiology](#)
[*Internet Addiction](#)
[Internet](#)
- Source:** PsycINFO

6. "I always wanted to be a ho when i grew up:" Narrative clarifications of Walters' criminal thinking styles.

- Citation:** Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2581), 0419-4209 (2012)
- Author(s):** English, Ebony M
- Institution:** English, Ebony M.: Indiana U Pennsylvania, US
- Language:** English
- Abstract:** This dissertation employs a qualitative research design by exploring the narratives of female drug offenders involved in a drug-crime lifestyle. In-depth interviews were conducted to examine the subjective experiences of 26 women and their overall perception of the drug-crime lifestyle. The sample was drawn from a population of recovering addicts who frequented a rehabilitative agency in Pittsburgh, Pennsylvania. The findings provide a subjective view of female drug addicts and through an assessment of the Walters' Psychological Inventory of Criminal Thinking Styles (PICTS), the narratives of the respondents were analyzed to evaluate specifically the applicability of Walters' eight thinking styles of cognition. Based on the emerging themes of the data, the study highlighted the complexities of Walters' theoretical thinking styles of drug users and offenders' thinking styles. This study found that the narratives of the women addicts did, in fact, corroborate Walters' theoretical perspective on drug use and crime. The study

recommends that more research is needed on the lines of female drug users and their intimate relationships, as well as methadone maintenance programs, victimization, child maltreatment, and the issue of drug recovery and desistance from crime. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Cognitive Style](#)
[*Crime](#)
[*Criminal Behavior](#)
[*Narratives](#)
[*Thinking](#)
[Criminals](#)
[Human Females](#)

Source: PsycINFO

7. The quest for white, privilege-cognizant, antiracist character: An autoethnographic inquiry.

Citation: Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2587), 0419-4209 (2012)

Author(s): Welliver, Daniel Mark

Institution: Welliver, Daniel Mark: Indiana U Pennsylvania, US

Language: English

Abstract: This is an autoethnographic inquiry into the quest to nurture and sustain a character that embodies White, privilege-cognizant antiracism (Bailey, 1998). Situated in a constructivist paradigm of inquiry and using a variety of qualitative methods for data collection, this research examined the researcher's own life pursuit of an antiracist identity. Data collected from guided interviews, archival documents, and daily journaling and field notes were subjected to multiple iterations of inductive analysis to reveal salient themes. Two essential findings emerged, each of which was supported by a number of subthemes. The first finding is that there may be particularly virulent and insidious impediments to realizing White, privilege-cognizant antiracist character for people who are conferred with multiple dimensions of privilege. Impediments include socialization into privilege; difficulties in nurturing relationships; a constantly evolving image-building enterprise; and addiction to control. The second essential finding is that the quest for White, privilege-cognizant, antiracist character takes meaningful form only as a part of a larger, holistic, spiritual or humanistic quest for tangible expressions of transformational love, social justice, and human liberation. This research seems to affirm some existing scholarly literature, while also suggesting new areas for inquiry. Recipients of this dissertation are invited to engage in continuing dialogue. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Ethnography](#)
[*Racism](#)
[*Social Issues](#)
[*Journal Writing](#)
[Social Justice](#)

Source: PsycINFO

8. Perceptions of the East Baton Rouge Parish Drug Abuse Resistance Education program (DARE) regarding delivery method, student acceptance and administrative procedures of participating officers, teachers and principals.

Citation: Dissertation Abstracts International Section A: Humanities and Social Sciences, 2012, vol./is. 72/7-A(2597), 0419-4209 (2012)

Author(s): Lloyd, Tiffany M

Institution: Lloyd, Tiffany M.: Southern U and Agricultural and Mechanical Coll., US

Language: English

Abstract: This study utilizes interviews and questionnaires to measure the perceptions of sixteen teachers, nine school principals, and seven DARE Officers in the Drug Abuse Resistance Education (DARE) program in East Baton Rouge Parish School System. Perceptions in three areas are examined: curricular content, program delivery, and efficacy. The participants overwhelmingly viewed the curricular content favorably. There was also strong agreement that the program was delivered well. Efficacy was judged less positively. However, this did not mitigate the participants' strong desire to continue implementation of the program. The results are consistent with the research literature on DARE which documents the popularity of the program, but acknowledges that it appears to have limited effects upon reducing student drug use. The results of this study were used to examine five options for delivering an in school program for preventing or reducing drug abuse, self-esteem and violence among students. The options explored ranged from retaining the DARE program in its current form, to eliminating it, and/or reforming it. The conclusion drawn is that the DARE program should be continued but it should be reformed based on students' needs. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Drug Abuse](#)
[*Educational Programs](#)
[*Resistance](#)
[*School Principals](#)
[*Teachers](#)
[Drug Education](#)
[Law Enforcement](#)
[Perception](#)
[Student Attitudes](#)

Source: PsycINFO

9. Conceptualizing withdrawal-induced escalation of alcohol self-administration as a learned, plasticity-dependent process.

Citation: Alcohol, March 2012(No Pagination Specified), 0741-8329 (Mar 27, 2012)

Author(s): Walker, Brendan M

Abstract: This article represents one of five contributions focusing on the topic "Plasticity and neuroadaptive responses within the extended amygdala in response to chronic or excessive alcohol exposure" that were developed by awardees participating in the Young Investigator Award Symposium at the "Alcoholism and Stress: A Framework for Future Treatment Strategies" conference in Volterra, Italy on May 3-6, 2011 that was organized/chaired by Drs. Antonio Noronha and Fulton Crews and sponsored by the National Institute on Alcohol Abuse and Alcoholism. This review discusses the dependence-induced neuroadaptations in affective systems that provide a basis for negative reinforcement learning and presents evidence demonstrating that escalated alcohol consumption during withdrawal is a learned, plasticity-dependent process. The review concludes by identifying changes within extended amygdala dynorphin/kappa-opioid receptor systems that could serve as the foundation for the occurrence of negative reinforcement processes. While some evidence contained herein may be specific to alcohol dependence-related learning and plasticity, much of the information will be of relevance to any addictive disorder involving negative reinforcement mechanisms. Collectively, the information presented within this review provides a framework to assess the negative reinforcing effects of alcohol in a manner that distinguishes neuroadaptations produced by chronic alcohol exposure from the actual plasticity that is associated with negative reinforcement learning in dependent organisms. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

10. Individual variability in the locus of prefrontal craving for nicotine: Implications for brain stimulation studies and treatments.

- Citation:** Drug and Alcohol Dependence, March 2012(No Pagination Specified), 0376-8716 (Mar 27, 2012)
- Author(s):** Hanlon, Colleen A; Jones, E. Morgan; Li, Xingbao; Hartwell, Karen J; Brady, Kathleen T; George, Mark S
- Abstract:** BACKGROUND: Attenuation of cue-elicited craving with brain stimulation techniques is a growing area of attention in addiction research. This investigation aims to guide these studies by assessing individual variability in the location of peak cortical activity during cue-elicited craving. METHOD: Twenty-six nicotine-dependent individuals performed a cue-elicited craving task in a 3T MRI scanner while BOLD signal data was collected. The task included epochs of smoking cues, neutral cues, and rest. The location of peak activity during smoking cues relative to neutral cues ('hot spot') was isolated for each individual. The spatial dispersion of the 26 cue-elicited hot spots (1 per participant) was quantified via hierarchical clustering. RESULTS: When viewing nicotine cues all 26 participants had at least one cluster of significant prefrontal cortex activity ($p < 0.05$, cluster corrected). Only 62% had peak activity in the medial prefrontal cortex cluster (including 100% of the men). In 15% of the participants peak activity was located in either the left lateral prefrontal cortex or left insula cluster. Peak activity in the remaining 23% was dispersed throughout the prefrontal cortex. CONCLUSION: There is considerable individual variability in the location of the cue-elicited 'hot spot' as measured by BOLD activity. Men appear to have a more uniform location of peak BOLD response to cues than women. Consequently, acquiring individual functional imaging data may be advantageous for either tailoring treatment to the individual or filtering participants before enrollment in treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO

11. A review of the interactions between alcohol and the endocannabinoid system: Implications for alcohol dependence and future directions for research.

- Citation:** Alcohol, March 2012(No Pagination Specified), 0741-8329 (Mar 27, 2012)
- Author(s):** Pava, Matthew J; Woodward, John J
- Abstract:** Over the past fifty years a significant body of evidence has been compiled suggesting an interaction between the endocannabinoid (EC) system and alcohol dependence. However, much of this work has been conducted only in the past two decades following the elucidation of the molecular constituents of the EC system that began with the serendipitous discovery of the cannabinoid 1 receptor (CB1). Since then, novel pharmacological and genetic tools have enabled researchers to manipulate select components of the EC system, to determine their contribution to the motivation to consume ethanol. From these preclinical studies, it is evident that CB1 contributes the motivational and reinforcing properties of ethanol, and chronic consumption of ethanol alters EC transmitter levels and CB1 expression in brain nuclei associated with addiction pathways. These results are augmented by invitro and exvivo studies showing that acute and chronic treatment with ethanol produces physiologically relevant alterations in the function of the EC system. This report provides a current and comprehensive review of the literature regarding the interactions between ethanol and the EC system. We begin by reviewing the studies published prior to the discovery of the EC system that compared the behavioral and physiological effects of cannabinoids with ethanol in addition to cross-tolerance between these drugs. Next, a brief overview of the molecular constituents of the EC system is provided as context for the subsequent review of more recent studies examining the interaction of ethanol with the EC system. These results are compiled into a summary providing a scheme for the known changes to the components of the EC system in different stages of alcohol dependence. Finally, future directions for research are

discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

12. Prefrontal and limbic resting state brain network functional connectivity differs between nicotine-dependent smokers and non-smoking controls.

Citation: Drug and Alcohol Dependence, March 2012(No Pagination Specified), 0376-8716 (Mar 26, 2012)

Author(s): Janes, Amy C; Nickerson, Lisa D; Frederick, Blaise deB; Kaufman, Marc J

Abstract: BACKGROUND: Brain dysfunction in prefrontal cortex (PFC) and dorsal striatum (DS) contributes to habitual drug use. These regions are constituents of brain networks thought to be involved in drug addiction. To investigate whether networks containing these regions differ between nicotine dependent female smokers and age-matched female non-smokers, we employed functional MRI (fMRI) at rest. METHODS: Data were processed with independent component analysis (ICA) to identify resting state networks (RSNs). We identified a subcortical limbic network and three discrete PFC networks: a medial prefrontal cortex (mPFC) network and right and left lateralized fronto-parietal networks common to all subjects. We then compared these RSNs between smokers and non-smokers using a dual regression approach. RESULTS: Smokers had greater coupling versus non-smokers between left fronto-parietal and mPFC networks. Smokers with the greatest mPFC-left fronto-parietal coupling had the most DS smoking cue reactivity as measured during an fMRI smoking cue reactivity paradigm. This may be important because the DS plays a critical role in maintaining drug-cue associations. Furthermore, subcortical limbic network amplitude was greater in smokers. CONCLUSIONS: Our results suggest that prefrontal brain networks are more strongly coupled in smokers, which could facilitate drug-cue responding. Our data also are the first to document greater reward-related network fMRI amplitude in smokers. Our findings suggest that resting state PFC network interactions and limbic network amplitude can differentiate nicotine-dependent smokers from controls, and may serve as biomarkers for nicotine dependence severity and treatment efficacy. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

13. Animal models of neuropsychiatry revisited: A personal tribute to teitelbaum.

Citation: Behavioural Brain Research, March 2012(No Pagination Specified), 0166-4328 (Mar 14, 2012)

Author(s): Robbins, T.W

Abstract: Several themes and principles of behavioural neuroscience are evident in the work of Phillip Teitelbaum. He has emphasised the importance of studying behaviour in simple preparations, of re-synthesising complex behavioural patterns from these elemental 'building-blocks' and understanding their often hierarchical organisation. He also more recently has become interested in the possible power of behavioural endophenotypes. His work has resulted in a new emphasis on animal neuropsychology which is highly relevant to human psychopathology. This article illustrates these themes from examples taken from animal models of sensory neglect, drug addiction and cognitive syndromes associated with schizophrenia and other neuropsychiatric disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

14. Dimensions of impulsivity among heavy drinkers, smokers, and heavy drinking smokers: Singular and combined effects.

Citation: Addictive Behaviors, March 2012(No Pagination Specified), 0306-4603 (Mar 14, 2012)

Author(s): Moallem, Nathasha R; Ray, Lara A

Abstract: Alcohol use and cigarette smoking commonly co-occur. The role impulsivity may play as a common underlying mechanism in alcohol use and cigarette smoking is of particular interest due to emerging evidence of it being a critical component across multiple forms of addiction. Impulsivity can be examined through several constructs including, risky decision-making, response inhibition, and delay reward discounting. Impulsivity and each of these specific constructs play significant roles in the initiation of drug use, continued use despite negative consequences, and potential to relapse. This study used three behavioral tasks to measure risky decision-making (Balloon Analog Risk Test; BART), response inhibition (Stop Signal Task; SST), and delay reward discounting (Delay Discounting Task; DDT). This study advances research on impulsivity and substance use by parsing out the various components of impulsivity and examining them across three groups, heavy drinkers only (HD) (N=107), smokers only (S) (N=67), and heavy drinking smokers (HDS) (N=213). Participants completed questionnaires, interviews, and neurocognitive tasks including the SST, BART, and DDT. Analyses supported an additive effect of alcohol and nicotine use in delay reward discounting. Heavy drinking smokers displayed steeper delay discounting of small rewards than did smokers only ($p < .05$) and heavy drinkers only ($p < .05$). This additive effect of smoking and drinking was not observed for risky decision-making and response inhibition, suggesting specificity of the effects for delay reward discounting. These findings indicate that those who both drink heavily and smoke cigarettes daily have increased delay reward discounting, than those in the S and HD groups. Future studies should examine these constructs longitudinally, as well as incorporate genetic and/or a neuroimaging component to these group comparisons in order to ascertain the biological bases of these behavioral findings. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

15. Attention-deficit/hyperactivity disorder subtype differentially predicts smoking expectancies in adolescents.

Citation: Journal of Adolescent Health, March 2012(No Pagination Specified), 1054-139X (Mar 21, 2012)

Author(s): Foster, Ida; Racicot, Simon; McGrath, Jennifer J

Abstract: PURPOSE: Attention deficit hyperactivity disorder (ADHD) is an established risk factor for smoking; however, no studies have considered whether precursors to smoking behavior differ among adolescents with ADHD. Smoking expectancies are beliefs about the potential consequences of smoking, and they develop before smoking initiation. ADHD characteristics may contribute to the formation of expectancies and eventual smoking behavior. We evaluated whether clinical levels of ADHD subtypes differentially predicted smoking expectancies. METHODS: Adolescents ($n = 221$; age mean = 12.67 years) completed the Smoking Expectancy Scale for Adolescents, answered standardized questions about their smoking behavior, and provided expired breath samples to verify never-smoking status. Parents completed the Conners' Parent Rating Scale for ADHD symptoms of inattention and hyperactivity/impulsivity. RESULTS: Adolescents with clinical levels of inattention were significantly less likely to endorse negative consequences, including Expected Costs (odds ratio [OR] = .16), Appearance-Presentation Costs (OR = .29), Social Costs (OR = .19), Health Costs (OR = .21), and Addiction Costs (OR = .39). Inattentive female adolescents were significantly more likely to endorse Weight Control as a consequence. Adolescents with clinical levels of hyperactivity/impulsivity were more likely to endorse positive consequences, including

Expected Benefits (OR = 5.31), Affect Control (OR = 2.60), and Boredom Reduction (OR = 3.14); they were less likely to endorse Social Costs (OR = .27). CONCLUSIONS: ADHD subtype differentially predicted smoking expectancies. Adolescents with ADHD may be more vulnerable to developing pro-smoking expectancies due to subtype-related deficits in neurocognitive processing. These findings have potential implications for developing targeted smoking prevention programs. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

16. Meeting the health care needs associated with poverty, homelessness and social exclusion: The need for an interprofessional approach.

Citation: Journal of Clinical Nursing, April 2012, vol./is. 21/7-8(907-908), 0962-1067;1365-2702 (Apr 2012)

Author(s): Cross, Wendy; Hayter, Mark [Ed]; Jackson, Debra [Ed]; Cleary, Michelle

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Institution: Cross, Wendy: Monash University, Clayton, VIC, Australia

Language: English

Abstract: Social exclusion is defined as 'the inability to fully engage in society because of social characteristics that reduce opportunities for successful social engagement'. Poverty is an issue of central concern to nurses and all health professionals, because it remains one of the key variables negatively affecting health and well-being and denies people the ability to achieve optimal health. In some ways, poverty is a contested term. It can be defined both socially and economically, and in absolute or relative terms, with most definitions operationalized depending who is presenting the definition. Poverty shapes the choices people make and is a catalyst for many social and health problems, such as homelessness for example, which is an increasing problem in many parts of the world. It is well known that homelessness is associated with a raft of negative health and social outcomes such as physical trauma, circulatory problems, mental health issues, teenage pregnancy, sexual exploitation, exposure to violence, infectious diseases and increased risk of death. Because conventional approaches to service delivery may not be effective when targeting people affected by homelessness, it is important that innovative ways of supporting these vulnerable people be developed. Models of care such as assertive community treatment and intensive case management have been shown to be useful for homeless people with a range of mental and physical and addictive illnesses. To conclude, health professionals will have occasion to be involved in the care of people who are homeless, socially excluded and living in poverty. As this population continues to grow and to age, there is a need for an interprofessional approach, so that health professionals can bring their skills together to work towards better health care for particularly vulnerable people. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Blackwell Publishing Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Health Service Needs](#)
[*Homeless](#)
[*Poverty](#)
[*Social Adjustment](#)
[*Health Personnel](#)
[Well Being](#)

Source: PsycINFO

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

17. From personal tragedy to personal challenge: Responses to stigma among sober living home residents and operators.

- Citation:** Sociology of Health & Illness, March 2012, vol./is. 34/3(379-395), 0141-9889;1467-9566 (Mar 2012)
- Author(s):** Heslin, Kevin C; Singzon, Trudy; Aimiuwu, Otaren; Sheridan, Dave; Hamilton, Alison
- Correspondence Address:** Heslin, Kevin C.: VHA Emergency Management Evaluation Center, Veterans Health Administration, 16111 Plummer St. (152), Sepulveda, CA, US, 91343, Kevin.Heslin@va.gov
- Institution:** Heslin, Kevin C.: VHA Emergency Management Evaluation Center, Veterans Health Administration, Sepulveda, CA, US
- Language:** English
- Abstract:** Sober living homes for people attempting to maintain abstinence from alcohol and drugs can act as a buffer against the high rates of substance misuse that are endemic to many urban environments. Sober living homes and other group homes for people with disabilities have faced persistent opposition from neighbourhood associations, which raises the question of stigma. This article describes the responses of sober living home residents and operators to the threat of stigma across a diverse set of neighbourhoods. Ten focus groups were conducted with 68 residents and operators of 35 sober living homes in Los Angeles County, California, between January 2009 and March 2010. Results showed that few residents reported experiences of blatant stigmatisation by neighbours; however, they were well aware of the stereotypes that could be ascribed to them. Despite this potential stigma, residents developed valued identities as helpers in their communities, providing advice to neighbours whose family or friends had substance use problems, and organising community service activities to improve the appearance of their neighbourhoods. With their attention to local context, sober living home residents and operators challenge the personal tragedy approach of much traditional advocacy on health-related stigma. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: The Authors. Sociology of Health & Illness--Foundation for the Sociology of Health & Illness/Blackwell Publishing Ltd.; YEAR: 2011
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Abuse](#)
[*Home Environment](#)
[*Sobriety](#)
[*Stigma](#)
[*Urban Environments](#)
- Source:** PsycINFO
- Full Text:** Available in *fulltext* at [Wiley](#)

18. Male batterers' alcohol use and gambling behavior.

- Citation:** Journal of Gambling Studies, March 2012, vol./is. 28/1(77-88), 1050-5350;1573-3602 (Mar 2012)
- Author(s):** Brasfield, Hope; Febres, Jeniimarie; Shorey, Ryan; Strong, David; Ninnemann, Andrew; Elmquist, Joanna; Andersen, Shawna M; Bucossi, Meggan; Schonbrun, Yael C; Temple, Jeff R; Stuart, Gregory L
- Correspondence Address:** Brasfield, Hope: Department of Psychology, University of Tennessee, 204 Austin Peay Building, Knoxville, TN, US, hope.brasfield@gmail.com
- Institution:** Brasfield, Hope: Department of Psychology, University of Tennessee, Knoxville, TN, US
- Language:** English
- Abstract:** Little work has examined the interrelations among intimate partner violence (IPV), alcohol use, and gambling behavior, and no studies have examined these relationships

among males court-ordered to batterer intervention programs (BIPs). The aim of the current investigation was to explore the associations between IPV, alcohol use, and gambling behavior among 341 males court-mandated to attend BIPs utilizing self-report measures. Voluntary, anonymous questionnaires were administered and completed during regularly scheduled BIP sessions. Compared to the general population, a higher percentage of the sample met criteria for pathological gambling (9%), and problem gambling (17%). Further, males exhibiting pathological gambling were more likely to be hazardous drinkers, and hazardous drinkers were more likely to exhibit pathological gambling. Additionally, pathological gamblers were at an increased risk for the perpetration of both physical and sexual aggression. Finally, gambling behavior uniquely predicted the perpetration of sexual aggression above and beyond alcohol use, impulsivity, and relationship satisfaction. The implications of these results for future research and intervention are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Human Males](#)
[*Intimate Partner Violence](#)
[*Pathological Gambling Intervention](#)

Source: PsycINFO

19. Gambling in Western and Eastern Europe: The example of Hungary.

Citation: Journal of Gambling Studies, March 2012, vol./is. 28/1(27-46), 1050-5350;1573-3602 (Mar 2012)

Author(s): Kun, Bernadette; Balazs, Hedvig; Arnold, Petra; Paksi, Borbala; Demetrovics, Zsolt

Correspondence Address: Demetrovics, Zsolt: Institutional Group on Addiction Research, Eotvos Lorand University, P.O. Box 179, Budapest, Hungary, 1580, demetrovics@t-online.hu

Institution: Kun, Bernadette: Institutional Group on Addiction Research, Eotvos Lorand University, Budapest, Hungary

Language: English

Abstract: The history of gambling in post-socialist countries is noticeably different from that of other countries in Europe. The goal of this study was therefore twofold: Firstly, to systematically review all European epidemiological studies related to excessive gambling in the general adult population, and secondly, to provide an overview of the state of gambling in Hungary based on the first ever nationwide representative survey, setting the results against the backdrop of the earlier European studies. A systematic review was carried out of European gambling studies which focus on a representative adult general population. Hungarian data was obtained from the National Survey on Addiction Problems in Hungary general adult population survey (N = 2,710). Pathological gambling was measured by the South Oaks Gambling Screen. Lifetime prevalence of excessive gambling (problem and pathological gambling) in the general adult population of European countries varies between 1.1% (Italy and Spain) and 6.5% (Estonia). In Hungary, the prevalence of problem gambling is 1.9%, with pathological gambling at 1.4%. The socio-demographic characteristics of the results are similar to those of other European countries. Using epidemiological data from the general adult populations of two post-socialist nations, it was possible to compare the results with data from 12 other European countries. Based on the data available, the extremely rapid liberation of the gambling market in the post-socialist countries has led to a similarly swift escalation in associated gambling problems. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Countries](#)
[*Epidemiology](#)
[*Pathological Gambling](#)

Source: PsycINFO

20. Reconsidering benzodiazepines in the treatment of panic disorder.

Citation: Australian and New Zealand Journal of Psychiatry, March 2012, vol./is. 46/3(271-272), 0004-8674;1440-1614 (Mar 2012)

Author(s): Starcevic, Vladan

Correspondence Address: Starcevic, Vladan: Nepean Hospital, Department of Psychiatry, PO Box 63, Penrith, NSW, Australia, 2751, starcev@wahs.nsw.gov.au

Institution: Starcevic, Vladan: Discipline of Psychiatry, Sydney Medical School, University of Sydney, Sydney, NSW, Australia

Language: English

Abstract: Comments on an article by S. Moylan et al. (see record 2012-06244-005). Moylan et al. examine the role of alprazolam in the treatment of panic disorder (PD) in Australia and conclude that it "merits renewed consideration". Moylan et al. note that despite guideline recommendations, there has recently been a significant increase in the use of alprazolam in Australia. They offer several explanations for this. It is often assumed that benzodiazepines are addictive, but the basis for this notion remains unclear. This is largely related to various conceptualizations of addiction. Moylan et al. have chosen a broad, behavior-based definition of addiction that does not necessarily include tolerance. Moylan et al. state that alprazolam has no advantage over other benzodiazepines in the treatment of PD based on their meta-analysis of the efficacy of alprazolam, lorazepam, diazepam and clonazepam, and on their suggestions that in comparison with other benzodiazepines, alprazolam is more toxic and therefore more dangerous in an overdose, more likely to be abused and more difficult to discontinue. However, except for clonazepam, there is more evidence of PD efficacy for alprazolam than for other benzodiazepines, and results of one meta-analysis, with all the limitations inherent to this method, should not be considered definitive. A finding that alprazolam is more toxic than other benzodiazepines needs to be replicated; benzodiazepines are generally safe in an overdose situation and their use is usually not precluded by a high suicide risk. Although it may appear that short-acting benzodiazepines (e.g. alprazolam or lorazepam) are more difficult to discontinue than the longer-acting ones (e.g. diazepam or clonazepam), this has not been systematically investigated. It may indeed be the time to reconsider the role of benzodiazepines in the treatment of anxiety disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alprazolam](#)
[*Drug Therapy](#)
[*Drug Tolerance](#)
[*Panic Disorder](#)
[*Side Effects \(Drug\)](#)
[Prescribing \(Drugs\)](#)

Source: PsycINFO

21. Effects of cumulative stress and impulsivity on smoking status.

Citation: Human Psychopharmacology: Clinical and Experimental, March 2012, vol./is. 27/2(200-208), 0885-6222;1099-1077 (Mar 2012)

Author(s): Ansell, Emily B; Gu, Peihua; Tuit, Keri; Sinha, Rajita

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Institution: Ansell, Emily B.: Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US

Language: English

Abstract: Objective: The stress-vulnerability model of addiction predicts that environmental factors, such as cumulative stress, will result in individual adaptations that decrease self-control, increase impulsivity, and increase risk for addiction. Impulsivity and cumulative stress are risk factors for tobacco smoking that are rarely examined simultaneously in research. Methods: We examined the indirect and direct effects of cumulative adversity in a community sample consisting of 291 men and women who participated in an assessment of cumulative stress, self-reported impulsivity, and smoking history. Data were analyzed using bootstrapping techniques to estimate indirect effects of stress on smoking via impulsivity. Results: Cumulative adversity is associated with smoking status via direct effects and indirect effects through impulsivity scores. Additional models examining specific types of stress indicate contributions of traumatic stress and recent life events as well as chronic relationship stressors. Conclusions: Overall, cumulative stress is associated with increased risk of smoking via increased impulsivity and via pathways independent of impulsivity. These findings support the stress-vulnerability model and highlight the utility of mediation models in assessing how, and for whom, cumulative stress increases risk of current cigarette smoking. Increasing self-control is a target for interventions with individuals who have experienced cumulative adversity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Chronic Stress](#)
[*Impulsiveness](#)
[*Risk Factors](#)
[*Tobacco Smoking](#)

Source: PsycINFO

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

22. Immune system inflammation in cocaine dependent individuals: Implications for medications development.

Citation: Human Psychopharmacology: Clinical and Experimental, March 2012, vol./is. 27/2(156-166), 0885-6222;1099-1077 (Mar 2012)

Author(s): Fox, Helen C; D'Sa, Carrol; Kimmerling, Anne; Siedlarz, Kristen M; Tuit, Keri L; Stowe, Raymond; Sinha, Rajita

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Institution: Fox, Helen C.: Connecticut Mental Health Center, Yale University School of Medicine, Department of Psychiatry, New Haven, CT, US

Language: English

Abstract: Objectives: Cocaine dependence is a chronic stress state. Furthermore, both stress and substance abuse have robust and reciprocal effects on immune system cytokines, which are known to be powerful modulators of mood. We therefore examine basal and provoked changes in peripheral cytokines in cocaine dependent individuals to better understand their role in the negative reinforcing effects of cocaine. Methods: Twenty-eight (16 F/12 M) treatment-seeking cocaine dependent individuals and 27 (14 F/13 M) social drinkers were exposed to three 5-min guided imagery conditions (stress, drug cue, relaxing) presented randomly across consecutive days. Measures of salivary cortisol, tumor necrosis factor alpha (TNFalpha), interleukin-10 (IL-10), and interleukin-1 receptor antagonist (IL-1ra) were collected at baseline and various post-imagery time-points. Results: Cocaine abusers demonstrated decreased basal IL-10 compared with social drinkers. They also showed significant elevations in pro-inflammatory TNFalpha when exposed to stress compared with when they were exposed to relaxing imagery. This was

not observed in the social drinkers. Conversely, social drinkers demonstrated increases in the anti-inflammatory markers, IL-10 and IL-1ra, following exposure to cue, which were not seen in the dependent individuals. Conclusions: Cocaine dependent individuals demonstrate an elevated inflammatory state both at baseline and following exposure to the stress imagery condition. Cytokines may reflect potentially novel biomarkers in addicted populations for treatment development. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Chronic Stress](#)
[*Cocaine](#)
[*Drug Dependency](#)
[*Immune System](#)
[*Inflammation](#)
[Imagery](#)

Source: PsycINFO

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

23. Explaining the stress-inducing effects of nicotine to cigarette smokers.

Citation: Human Psychopharmacology: Clinical and Experimental, March 2012, vol./is. 27/2(150-155), 0885-6222;1099-1077 (Mar 2012)

Author(s): Parrott, Andrew C; Murphy, Rachel S

Correspondence Address: Parrott, Andrew C.: Department of Psychology, Swansea University, Swansea, United Kingdom, SA2 8PP, a.c.parrott@swan.ac.uk

Institution: Parrott, Andrew C.: Department of Psychology, Swansea University, Swansea, United Kingdom

Language: English

Abstract: Aims: To explain how nicotine dependency causes mood fluctuation and increases daily stress. Methods: Prospective studies show that taking-up smoking leads to higher stress and depression. Cross-sectional studies show that adult smokers report more irritability, stress and depression than non-smokers. Prospective studies show that smoking cessation leads to enduring mood gains. The adverse mood effects of nicotine dependency are explained by the deprivation reversal model. In between cigarettes, most smokers experience subtle abstinence symptoms, and cumulatively these can increase everyday stress. Hence, adolescents who take up smoking become more stressed, and quitting reduces stress. An explanatory leaflet to explain this model was empirically assessed with tobacco smokers. Results: In a cohort study of 82 cigarette smokers, knowledge levels were significantly enhanced by the explanatory leaflet, and this understanding was maintained 1 week later. Hence, normal cigarette smokers can understand the adverse mood consequences of nicotine addiction. The information leaflet could prove useful for tobacco-education packages in schools, and smoking-cessation packages with adults. Conclusions: The deprivation reversal model can be easily described using a simple leaflet. It explains how nicotine dependency can cause mood fluctuation, and outlines the psychological benefits of quitting. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Emotional States](#)
[*Nicotine](#)
[*Smoking Cessation](#)
[*Stress](#)
[*Tobacco Smoking](#)

Source: PsycINFO

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

24. Drug control in marginalised communities.

Citation: The Lancet, March 2012, vol./is. 379/9818(778), 0140-6736 (Mar 3, 2012)

Author(s): No authorship indicated

Language: English

Abstract: This issue of The Lancet examines drug control in marginalized communities. Success stories in drug control include governmental adherence to international conventions, prevention of licit to illicit drug diversion, and improved control of some precursor chemicals. However, at the public health level, debate continues over whether international drug conventions and global solutions are needed, or whether national policies aligned with the risks of different drugs would be more effective. In many countries, whether developed or less developed, communities with high rates of violence, social disintegration, and organized crime have endemic drug misuse. Limited education, unemployment, and poor health are the norm in these communities, and drug addiction combined with lack of access to health services fuels ill health. Drug treatment and rehabilitation services are poorly accessed by those most in need, who, in addition, neglect other physical and mental health problems they may have. Ensuring equitable access to health services, appropriate treatment, and continued follow-up for illicit drug users in marginalized communities is a challenge yet to be met by most governments. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Communities](#)
[*Drug Rehabilitation](#)
[*Health Care Services](#)
[*Public Health](#)
[*Marginalization](#)

Source: PsycINFO

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

25. Concurrent use of alcohol and sedatives among persons prescribed chronic opioid therapy: Prevalence and risk factors.

Citation: The Journal of Pain, March 2012, vol./is. 13/3(266-275), 1526-5900 (Mar 2012)

Author(s): Saunders, Kathleen W; Von Korff, Michael; Campbell, Cynthia I; Banta-Green, Caleb J; Sullivan, Mark D; Merrill, Joseph O; Weisner, Constance

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Institution: Saunders, Kathleen W.: Group Health Research Institute, Seattle, WA, US

Language: English

Abstract: Taking opioids with other central nervous system (CNS) depressants can increase risk of oversedation and respiratory depression. We used telephone survey and electronic health care data to assess the prevalence of, and risk factors for, concurrent use of alcohol and/or sedatives among 1,848 integrated care plan members who were prescribed chronic opioid therapy (COT) for chronic non-cancer pain. Concurrent sedative use was defined by receiving sedatives for 45+days of the 90 days preceding the interview; concurrent alcohol use was defined by consuming 2+ drinks within 2 hours of taking an opioid in the prior 2 weeks. Some analyses were stratified by substance use disorder (SUD) history (alcohol or drug). Among subjects with no SUD history, 29% concurrently used sedatives versus 39% of those with an SUD history. Rates of concurrent alcohol use were similar (12 to 13%) in the 2 substance use disorder strata. Predictors of concurrent sedative use included SUD history, female gender, depression, and taking opioids at higher doses and for more than 1 pain condition. Male gender was the only predictor of concurrent alcohol

use. Concurrent use of CNS depressants was common among this sample of COT users regardless of substance use disorder status. Perspective: Risks associated with concurrent use of CNS depressants are not restricted to COT users who abuse those substances. And, the increased risk of concurrently using CNS depressants is not restricted to opioid users with a prior SUD history. COT requires close monitoring, regardless of substance use disorder history. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Pain Society; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Epidemiology](#)
[*Opiates](#)
[*Risk Factors](#)
[*Sedatives](#)
[Alcohol Abuse](#)
[Drug Abuse](#)
[Pain](#)

Source: PsycINFO

26. The effects of childhood ADHD symptoms on early-onset substance use: A Swedish twin study.

Citation: Journal of Abnormal Child Psychology: An official publication of the International Society for Research in Child and Adolescent Psychopathology, April 2012, vol./is. 40/3(425-435), 0091-0627;1573-2835 (Apr 2012)

Author(s): Chang, Zheng; Lichtenstein, Paul; Larsson, Henrik

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Institution: Chang, Zheng: Department of Medical Epidemiology and Biostatistics, Karolinska Institutet, Stockholm, Sweden

Language: English

Abstract: Research has documented that children and adolescents with attention-deficit/hyperactivity disorder (ADHD) are at increased risk of substance use problems. Few studies, however, have focused on early-onset substance use. This study therefore investigated how the two symptom dimensions of ADHD (hyperactivity/impulsivity and inattention) are associated with early-onset substance use, the role of persistent ADHD for the association, and to what extent the association is influenced by genetic and environmental factors. Twins (1,480 pairs) in the Swedish Twin Study of Child and Adolescent Development were followed from childhood to adolescence. ADHD symptoms were measured at age 8-9 and age 13-14 via parent-report, whereas substance use was assessed at age 13-14 via self-report. Results revealed that hyperactive/impulsive symptoms predicted early-onset "sometimes" tobacco use (adjusted odds ratios, 1.12, for one symptom count), controlling for inattentive symptoms and conduct problem behaviors. There is no independent effect of inattentive symptoms on early-onset substance use. Children with persistent hyperactivity/impulsivity (defined as scoring above the 75th percentile at both time points) had a pronounced risk of both early-onset tobacco and alcohol use (adjusted odds ratios from 1.86 to 3.35, compared to the reference group). The associations between hyperactivity/impulsivity and early-onset substance use were primarily influenced by genetic factors. Our results indicated that hyperactivity/impulsivity, but not inattention, is an important early predictor for early-onset substance use, and a shared genetic susceptibility is suggested to explain this association. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Attention Deficit Disorder with Hyperactivity](#)

*Drug Usage

*Symptoms

Source: PsycINFO

27. Substance use among Chinese, Filipino, and Vietnamese adult men living in San Jose, Daly City, and San Francisco, and its implications on ATOD prevention services.

Citation: Journal of Ethnicity in Substance Abuse, January 2012, vol./is. 11/1(86-99), 1533-2640;1533-2659 (Jan 2012)

Author(s): Toleran, Daniel E; Tran, Phu Duc; Cabangun, Ben; Lam, Jon; Battle, Robynn S; Gardiner, Phillip

Correspondence Address: Toleran, Daniel E.: Asian American Recovery Services, Inc., 2166 Hayes Street, Suite 303, San Francisco, CA, US, 94117, dtoleran@aars.org

Institution: Toleran, Daniel E.: Asian American Recovery Services, Inc., San Francisco, CA, US

Language: English

Abstract: This intervention study collected data on Chinese, Filipino, and Vietnamese high-risk adults to ascertain similarities and differences in drug use patterns. Study participants (N = 126) participated in a 5-week intervention study to mitigate substance abuse and the prevalence of hepatitis C and HIV among high-risk adults in San Francisco, San Mateo, and Santa Clara Counties of California. Data reported were collected at baseline. The National Outcome Measures questionnaire was used to document individual substance use in the past 30 days. Filipinos reported higher use rates for alcohol, cigarettes, marijuana, and crack cocaine in the past 30 days compared with their Chinese and Vietnamese counterparts; these differences proved to be statistically significant ($p \leq .03$). Data analysis also showed that the alcohol use of Filipino and Vietnamese homosexual men was significantly greater than their Chinese counterparts ($p = .04$). A statistically significant inverse association was found for alcohol use for those in the criminal justice system during the past 30 days (odds ratio [OR] = 0.37, $p = .03$). In addition, a positive association for other tobacco use (OR = 11.98, $p = .00$) was reported for those in the criminal justice system. Age group analyses indicated a positive association for those between 18-25 years old for alcohol use (OR = 5.40, $p = .00$). These data confirm the importance of disaggregation of data. If collapsed into a general Asian or Asian and Pacific Islander ethnic group category, as is often the case, the unique behaviors of the individual groups would be lost. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Asians
*Drug Abuse
*Epidemiology
*Human Males
*Prevention
At Risk Populations
Intervention

Source: PsycINFO

28. Latino/as in substance abuse treatment: Substance use patterns, family history of addiction, and depression.

Citation: Journal of Ethnicity in Substance Abuse, January 2012, vol./is. 11/1(75-85), 1533-2640;1533-2659 (Jan 2012)

Author(s): Rojas, Julio I; Hallford, Gene; Brand, Michael W; Tivis, Laura J

Correspondence Address: Rojas, Julio I.: Department of Psychiatry and Behavioral Sciences, University of Oklahoma Health Sciences Center, 920 Stanton L. Young, WP-3545, Oklahoma City, OK, US, 73126, julio-rojas@ouhsc.edu

Institution: Rojas, Julio I.: University of Oklahoma Health Sciences Center, Oklahoma City, OK, US

Language: English

Abstract: This study describes a sample of Latino/as in substance abuse treatment. We were interested in substance use patterns, gender differences, family history of addiction, and depression. Questionnaires completed by Latino/as (N = 209) were identified from 12,000 sets completed by participants in treatment from 1993-2003. Significant gender differences emerged, with Latinas reporting higher rates of stimulant abuse and depression. A family history of substance use disorders in primary or secondary family members was reported by 91% of participants. These data suggest that understanding gender differences related to substance use and depression among Latino/as in treatment warrants attention. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: Annual meeting of the Research Society on Alcoholism. Jun, 2004. Vancouver. BC, Canada. Study results were previously presented at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Drug Abuse Prevention](#)
[*Major Depression](#)
[*Family History](#)
[Drug Abuse](#)
["Latinos/Latinas"](#)

Source: PsycINFO

29. Exploring the intersection of neighborhood racial and economic composition and individual race on substance use among male adolescents.

Citation: Journal of Ethnicity in Substance Abuse, January 2012, vol./is. 11/1(52-74), 1533-2640;1533-2659 (Jan 2012)

Author(s): Cronley, Courtney; White, Helene R; Mun, Eun-Young; Lee, Chioun; Finlay, Andrea; Loeber, Rolf

Correspondence Address: Cronley, Courtney: School of Social Work, University of Texas, Arlington, 211 South Cooper Street, Box 19129, Arlington, TX, US, 76019, cronley@uta.edu

Institution: Cronley, Courtney: University of Texas, Arlington, Arlington, TX, US

Language: English

Abstract: This article examines how Blacks and Whites living in neighborhoods with divergent racial and income profiles differed in early onset (by age 14 years) and adolescent lifetime prevalence (by age 18 years) of substance use, with longitudinal data from 473 high-risk boys (58% Black). A latent profile analysis identified four neighborhood classes: Black, lower-income; racially mixed, middle-income; White, middle-income; and White, upper-income. Bivariate analyses showed that Blacks living in racially mixed, middle-income neighborhoods reported the lowest rates of tobacco and marijuana use. Whites living in White, upper-income neighborhoods reported higher substance use prevalence, particularly marijuana. Findings suggest that substance use prevention efforts are critical for Whites in upper-income communities. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Attitudes](#)
[*Drug Usage](#)
[*Neighborhoods](#)
[*Racial and Ethnic Attitudes](#)
[*Socioeconomic Status](#)
[Blacks](#)

Income Level
Whites

Source: PsycINFO

30. Comments on "Gender, ethnic, age, and relationship differences in non-traditional college student alcohol consumption: A tri-ethnic study".

Citation: Journal of Ethnicity in Substance Abuse, January 2012, vol./is. 11/1(48-51), 1533-2640;1533-2659 (Jan 2012)

Author(s): Stolberg, Victor B

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Institution: Stolberg, Victor B.: Essex County College, Newark, NJ, US

Language: English

Abstract: Comments on an article by Stephanie Babb et al. (see record 2012-05944-002). The purpose of these comments is to serve as a reaction to an article by Stephanie Babb, Cynthia Stewart, and Christine Bachman of the University of Houston-Downtown. The article is ambitiously titled "Gender, Ethnic, Age, and Relationship Differences in Non-Traditional College Students' Alcohol Consumption: A Tri-Ethnic Study" and is published in this issue of the Journal of Ethnicity in Substance Abuse. These comments are not intended to be a definitive response to all of the possible points raised by the authors of the article; rather they are reflective of the personal views of an addiction professional who has been active in the field for several years, particularly involved with efforts directed at substance use by non-traditional college students, and who has published previously on related topics. It is only possible to react to a few specific issues raised by the article; another commentator or a peer reviewer would probably address a myriad other areas. Indeed, several other topics of concern could have been addressed, but I felt it prudent and hopefully more productive to keep my comments more narrowly focused on some of the matters that seemed more pressing. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Drinking Attitudes](#)
[*College Students](#)
[*Drinking Behavior](#)
[*Group Differences](#)
[Age Differences](#)
[Human Sex Differences](#)
[Racial and Ethnic Differences](#)
[Interpersonal Relationships](#)

Source: PsycINFO

31. Racial and ethnic differences in substance abuse treatment initiation and engagement.

Citation: Journal of Ethnicity in Substance Abuse, January 2012, vol./is. 11/1(1-21), 1533-2640;1533-2659 (Jan 2012)

Author(s): Acevedo, Andrea; Garnick, Deborah W; Lee, Margaret T; Horgan, Constance M; Ritter, Grant; Panas, Lee; Davis, Steve; Leeper, Tracy; Moore, Rebecca; Reynolds, Mark

Correspondence Address: Acevedo, Andrea: Brandeis University, 415 South Street, MS035, Waltham, MA, US, 02453, aacevedo@brandeis.edu

Institution: Acevedo, Andrea: Brandeis University, Waltham, MA, US

Language: English

Abstract: This study examined variations by race and ethnicity in initiation and engagement, two performance measures of treatment for substance use disorders that focus on the timely

receipt of services during the early stage of substance abuse treatment. Administrative data from the Oklahoma Department of Mental Health and Substance Abuse Services were linked with facility-level information from the National Survey of Substance Abuse Treatment Services. We found that Black clients were least likely to initiate treatment, but no race or ethnic differences in treatment engagement were found when compared by race or ethnicity. Most client and facility characteristics' association with initiation or engagement did not differ across racial or ethnic groups. Increased attention is needed to understand what may contribute to the differences and how to address them. This study also offers an approach that state agencies may implement for monitoring treatment quality and examining racial and ethnic disparities in substance abuse treatment services. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Abuse Prevention](#)
[*Racial and Ethnic Differences](#)
[*Therapeutic Processes](#)

Source: PsycINFO

32. Broad reach and targeted recruitment using Facebook for an online survey of young adult substance use.

Citation: Journal of Medical Internet Research, January 2012, vol./is. 14/1(228-237), 1438-8871 (Jan-Feb 2012)

Author(s): Ramo, Danielle E; Prochaska, Judith J

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Institution: Ramo, Danielle E.: Department of Psychiatry, University of California, San Francisco, San Francisco, CA, US

Language: English

Abstract: Background: Studies of tobacco use and other health behaviors have reported great challenges in recruiting young adults. Social media is widely used by young adults in the United States and represents a potentially fast, affordable method of recruiting study participants for survey research. Objective: The present study examined Facebook as a mechanism to reach and survey young adults about tobacco and other substance use. Methods: Participants were cigarette users, age 18-25 years old, living throughout the United States and recruited through Facebook to complete a survey about tobacco and other substance use. Paid advertising using Facebook's Ad program over 13 months from 2010 Feb 28 to 2011 Apr 4 targeted by age (18-25), location (United States or California), language (English), and tobacco- and/or marijuana-related keywords. Facebook approved all ads. Results: The campaign used 20 ads, which generated 28,683,151 impressions, yielding 14,808 clicks (0.7% of targeted Facebook members), at an overall cost of \$6,628.24. The average cost per click on an ad was \$0.45. The success of individual ads varied widely. There was a rise in both clicks and impressions as the campaign grew. However, the peak for clicks was 3 months before the peak for ad impressions. Of the 69,937,080 accounts for those age 18-25 in the United States, Facebook estimated that 2.8% (n = 1,980,240) were reached through tobacco and marijuana keywords. Our campaign yielded 5237 signed consents (35.4% of clicks), of which 3093 (59%) met criteria, and 1548 (50% of those who met criteria) completed the survey. The final cost per valid completed survey was \$4.28. The majority of completed surveys came from whites (69%) and males (72%). The sample averaged 8.9 cigarettes per day (SD 7.5), 3.8 years of smoking (SD 2.9), with a median of 1 lifetime quit attempts; 48% did not intend to quit smoking in the next 6 months. Conclusions: Despite wide variety in the success of individual ads and potential concerns about sample representativeness, Facebook was a useful, cost-effective recruitment source for young-adult smokers to complete a survey about the use of tobacco and other substances. The current findings support Facebook as a

viable recruitment option for assessment of health behavior in young adults. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Danielle E. Ramo, Judith J. Prochaska

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Patient Selection](#)
[*Online Social Networks](#)

Source: PsycINFO

33. Double-blind placebo-controlled evaluation of the PROMETATM protocol for methamphetamine dependence. Erratum.

Citation: Addiction, April 2012, vol./is. 107/4(858-859), 0965-2140;1360-0443 (Apr 2012)

Author(s): No authorship indicated

Language: English

Abstract: Reports an error in "Double-blind placebo-controlled evaluation of the PROMETATM protocol for methamphetamine dependence" by Walter Ling, Steven Shoptaw, Maureen Hillhouse, Michelle A. Bholat, Charles Charuvastra, Keith Heinzerling, David Chim, Jeffrey Annon, Patrick T. Dowling and Geetha Doraimani (Addiction, 2012[Feb], Vol 107[2], 361-369). In table 2 of the original article, the word 'methadone' was incorrectly introduced. The first line should read as follows: Mean proportion methamphetamine-negative urine tests The publishers apologizes for this error. (The following abstract of the original article appeared in record 2012-01784-023). Aims: To evaluate the efficacy and safety of the PROMETATM Protocol for treating methamphetamine dependence. Design: A double-blind, placebo-controlled 108-day study with random assignment to one of two study conditions: active medication with flumazenil (2 mg infusions on days 1, 2, 3, 22, 23), gabapentin (1200 mg to day 40) and hydroxazine (50 mg to day 10) versus placebo medication (with active hydroxazine only). Setting: Three substance abuse treatment clinics: two in-patient, one out-patient. Participants: Treatment-seeking, methamphetamine-dependent adults (n = 120). Measurements: Primary outcome was percentage of urine samples testing negative for methamphetamine during the trial. Findings: No statistically significant between-group differences were detected in urine drug test results, craving, treatment retention or adverse events. Conclusions: The PROMETA protocol, consisting of flumazenil, gabapentin and hydroxyzine, appears to be no more effective than placebo in reducing methamphetamine use, retaining patients in treatment or reducing methamphetamine craving. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: The Authors--Addiction Society for the Study of Addiction; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Therapy](#)
[*Methamphetamine](#)
[*Public Health](#)
[*Side Effects \(Drug\)](#)
[Safety](#)

Source: PsycINFO

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

34. Top priorities for alcohol regulators in the United States: protecting public health or the alcohol industry? Corrigendum.

Citation: Addiction, April 2012, vol./is. 107/4(854-857), 0965-2140;1360-0443 (Apr 2012)

Author(s): Mart, Sarah M

Language: English

Abstract: Reports an error in "Top priorities for alcohol regulators in the United States: Protecting public health or the alcohol industry" by Sarah M. Mart (Addiction, 2012[Feb], Vol 107[2], 259-262). In the original article, the Conclusions in the abstract should read as follows: The National Conference of State Liquor Administrators in the United States is dominated by the global companies that produce, import, distribute and sell alcohol, highlighting a lack of public health considerations within the Association's liquor control agenda. The word 'private' has been removed. (The following abstract of the original article appeared in record 2012-01784-010). Aims: This paper describes alcohol industry involvement in the 2010 annual conference proceedings of the National Conference of State Liquor Administrators (NCSLA) in the United States. Design: The author attended the conference, observed conference attendees and panelists and identified key themes in the panel sessions. Setting: The NCSLA Annual Meeting took place 20-24 June 2010 in New Orleans, Louisiana. Participants: NCSLA meeting attendees and panelists were professionals from state alcohol control systems; federal government agencies; and companies representing the alcohol industry. Measurements: The total number of conference attendees and participants were counted as well as the number of attendees and participants from regulator, industry and public health sectors. Findings: More than two-thirds (72.2%) of the 187 conference attendees were from alcohol producers, importers, wholesalers, retailers or their attorneys. Nearly two-thirds (65.0%) of the 40 panelist swere from the alcohol industry. The author of this paper was the only attendee, and the only panelist, representing public health policy. Conclusions: The National Conference of State Liquor Administrators in the United States is dominated by the private, global companies that produce, import, distribute and sell alcohol, highlighting a lack of public health considerations within the Association's liquor control agenda. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohols](#)
[*Government Policy Making](#)
[*Liquor](#)
[*Management Personnel](#)
[*Public Health](#)

Source: PsycINFO

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

35. 100 years ago in addiction science.

Citation: Addiction, April 2012, vol./is. 107/4(851-853), 0965-2140;1360-0443 (Apr 2012)

Author(s): Edwards, Griffith

Language: English

Abstract: This article gives an authoritative contemporary American view on the physical and mental impairments caused by excessive drinking. From a clinical study of the history and progress of more than 10,000 cases of inebriety and alcoholism investigated during a period of thirty-five years, certain psychoses have been observed in many cases. Statistics show that over 50 per cent. of all inebriates and alcoholics come from stocks with inherited degenerations, and the inebriety is literally the expression of transmitted defects. Clinically, the person who uses spirits, either in so-called moderation or to evident excess, is always found to have some defectiveness in regard to his senses. Thus, in railroading and occupations where accuracy of sight and other sensory activities with rapidity of thought are absolutely essential, alcoholics are found incompetent. The emphasis on degeneration and the familial transmission of inebriety reflected a central belief of that time. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Disease Transmission](#)

[*Physical Disorders](#)

[*Psychosis](#)

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

36. The call for evidence-based drink and driving policies in Brazil.

Citation: Addiction, April 2012, vol./is. 107/4(849-850), 0965-2140;1360-0443 (Apr 2012)
Author(s): Andreuccetti, Gabriel; de Carvalho, Heraclito Barbosa; Cherpitel, Cheryl J; Leyton, Vilma
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Institution: Andreuccetti, Gabriel: University of Sao Paulo Medical School, Department of Preventive Medicine, Sao Paulo, Brazil
Language: English
Abstract: This article focuses on the current drink and driving policies in Brazil. Concerning the drink and driving situation in Brazil, it appears that driving under the influence of alcohol (DUI) has finally reached a national debate level. The current drink-driving policies and related legislation's that are emerging in Brazil do not take into consideration the accumulated research derived evidence on this issue. Instead, the measures proposed seem more like a patchwork of strategies that do not integrate scientific evidence and policy makers' opinions, further frustrating practitioners who are on the front lines. The policy makers should search for the key to changing the perceived risk of DUI sanctioning in countries such as Brazil, which may not rely on the strictness of drink-driving laws but rather on the creation of policies emerging from research. It is time to bring together legislators, researchers and practitioners to help create an evidence based DUI national program in Brazil to form and evaluate drink driving policies more clearly. Given that alcohol related health policy research has proved to be an effective way to reduce alcohol related traffic injuries and deaths in many other regions in the world, the question now is whether the public and the government in developing countries such as Brazil are able to invest in this. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Alcoholism](#)
[*Driving Under the Influence](#)
[*Policy Making](#)
[*Risk Assessment](#)
[Laws](#)

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

37. Alcohol-dependence: The current French craze for Baclofen.

Citation: Addiction, April 2012, vol./is. 107/4(848-849), 0965-2140;1360-0443 (Apr 2012)
Author(s): Rolland, Benjamin; Bordet, Regis; Cottencin, Olivier
Correspondence Address: Rolland, Benjamin, benjamin.rolland@chru-lille.fr
Institution: Rolland, Benjamin: Universite Lille Nord de France, Lille, France
Language: English
Abstract: This article focuses on the current craze for the use of the drug baclofen in France. Over the last 3 years, the word baclofen has appeared on the cover of numerous non-specialized French journals, which sing the praises of its potentially miraculous effects on alcohol

dependence. an association of physicians prescribing high dose baclofen (HDB) and patients proclaiming that they were cured of their alcohol dependence through this treatment are now lobbying for official approval to extend HDB to alcohol dependence. Currently, the issue of baclofen in France seems to have taken quite an emotional turn. Some clinical trials should start in the near future and it is hoped that they will provide definitive answers on the efficacy and tolerance of HDB in alcohol dependence. Protocols for HDB prescriptions should be validated by a collegial expert group of practitioners, and patient follow-up should be monitored strictly to identify immediately any adverse events during treatment. Such a supervised prescription system fits into a logic of harm reduction. Because it would be illusory to prevent patients from obtaining baclofen by their own means, it seems preferable to deliver HDB under close observation by teams with good scientific knowledge and regular use of the product. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Baclofen](#)
[*Drug Dosages](#)
[*Drug Therapy](#)

Source: PsycINFO

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

38. Greater prevalence of proposed DSM-5 nicotine use disorder compared to DSM-IV nicotine dependence in treated adolescents and young adults.

Citation: Addiction, April 2012, vol./is. 107/4(810-818), 0965-2140;1360-0443 (Apr 2012)

Author(s): Chung, Tammy; Martin, Christopher S; Maisto, Stephen A; Cornelius, Jack R; Clark, Duncan B

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Institution: Chung, Tammy: Western Psychiatric Institute and Clinic, University of Pittsburgh Medical Center, Pittsburgh, PA, US

Language: English

Abstract: Aims: Compared to DSM-IV nicotine dependence, proposed DSM-5 nicotine use disorder (NUD) would lower the threshold from three to two symptoms, and increase the number of criteria used for diagnosis from seven to 11. The impact of the proposed changes on nicotine disorder prevalence and the concurrent validity of diagnostic criteria were examined. Design: Cross-sectional survey to compare DSM-IV and proposed DSM-5 algorithms. Setting and participants: Adolescent (n = 179) and young adult (n = 292) past-year cigarette users recruited from addictions treatment. Measurements: Semi-structured clinical interview to evaluate DSM-IV nicotine dependence, and 10 of the 11 proposed DSM-5 NUD criteria; 30-day time-line follow-back; and the Fagerstrom Test for Nicotine Dependence (FTND). Findings: Prevalence of proposed DSM-5 NUD (two-symptom threshold) was much higher (adolescents: 68.7%, young adults: 86.0%) than DSM-IV nicotine dependence (33.0% and 59.6%, respectively), although prevalence of DSM-5 severe NUD (four-symptom threshold) was similar to DSM-IV nicotine dependence. Concurrent validity analyses in both samples indicated consistent support for DSM-5 severe NUD diagnosis (four symptoms) but not for the moderate NUD (two symptoms) diagnosis, which had modest relations with only FTND score. IRT analyses indicated strong support for the new craving item, but not for the proposed interpersonal problems and hazardous use items. Conclusions: The proposed DSM-5 nicotine use disorder criteria have substantial limitations when applied to adolescents and young adults, and appear to have low concurrent validity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors, Addiction--Society for the Study of Addiction; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Age Differences](#)
[*Diagnostic and Statistical Manual](#)
[*Drug Dependency](#)
[*Epidemiology](#)
[*Nicotine](#)

Source: PsycINFO

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

39. Cognitive and subjective effects of mephedrone and factors influencing use of a 'new legal high'.

Citation: Addiction, April 2012, vol./is. 107/4(792-800), 0965-2140;1360-0443 (Apr 2012)

Author(s): Freeman, Tom P; Morgan, Celia J. A; Vaughn-Jones, James; Hussain, Nahida; Karimi, Kash; Curran, H. Valerie

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Institution: Freeman, Tom P.: Clinical Psychopharmacology Unit, Clinical Health Psychology, University College London, London, United Kingdom

Language: English

Abstract: Aims: Use of the stimulant drug mephedrone increased dramatically in 2009, and it is still available in the United Kingdom after being controlled in April 2010. This study aimed to assess mephedrone's acute cognitive and subjective effects. Design: A mixed within- and between-subjects design compared 20 mephedrone users, first while intoxicated (T1) and secondly drug free (T2); and 20 controls twice when drug free (T1 and T2). Settings: Participants' own homes. Participants: Healthy adults recruited from the community. Measurements: Subjective effects, episodic and working memory, phonological and semantic fluency, psychomotor speed and executive control at were assessed at T1 and T2. Trait schizotypy, depression, changes in mephedrone use since the ban and attitudes influencing use of a hypothetical new legal high were indexed at T2 only. Findings: Compared with controls, mephedrone users had generally impaired prose recall ($P = 0.037$) and higher scores in schizotypy ($P < 0.001$) and depression ($P = 0.01$). Mephedrone acutely primed a marked 'wanting' for the drug ($P < 0.001$), induced stimulant-like effects, impaired working memory ($P < 0.001$) and enhanced psychomotor speed ($P = 0.024$). Impulsivity in mephedrone users correlated with the number of hours in an average (nearly 8 hour) mephedrone session ($r = 0.6$). Users would be drawn to use a new legal high if it were pure, had no long/short term harms, and was positively rated by friends or on the internet. Conclusions: Mephedrone impairs working memory acutely, induces stimulant-like effects in users and is associated with binge use. Factors that influence users' attitudes to new drugs might help to predict future trends in use of the many new psychoactive substances emerging on the internet. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cognitive Ability](#)
[*Drug Usage](#)

Source: PsycINFO

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

40. Interventions to prevent substance use and risky sexual behaviour in young people: A systematic review.

Citation: Addiction, April 2012, vol./is. 107/4(733-747), 0965-2140;1360-0443 (Apr 2012)

Author(s): Jackson, Caroline; Geddes, Rosemary; Haw, Sally; Frank, John

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Institution: Jackson, Caroline: Scottish Collaboration for Public Health Research and Policy, Western General Hospital, Edinburgh, United Kingdom

Language: English

Abstract: Aims: To identify and assess the effectiveness of experimental studies of interventions that report on multiple risk behaviour outcomes in young people. Methods: A systematic review was performed to identify experimental studies of interventions to reduce risk behaviour in adolescents or young adults and that reported on both any substance (alcohol, tobacco and illicit drug) use and sexual risk behaviour outcomes. Two authors reviewed studies independently identified through a comprehensive search strategy and assessed the quality of included studies. The report was prepared in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. Results: From 1129 papers, 18 experimental studies met our inclusion criteria, 13 of which were assigned a strong or moderate quality rating. The substantial heterogeneity between studies precluded the pooling of results to give summary estimates. Intervention effects were mixed, with most programmes having a significant effect on some outcomes, but not others. The most promising interventions addressed multiple domains (individual and peer, family, school and community) of risk and protective factors for risk behaviour. Programmes that addressed just one domain were generally less effective in preventing multiple risk behaviour. Conclusions: There is some, albeit limited, evidence that programmes to reduce multiple risk behaviours in school children can be effective, the most promising programmes being those that address multiple domains of influence on risk behaviour. Intervening in the mid-childhood school years may have an impact on later risk behaviour, but further research is needed to determine the effectiveness of this approach. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors, Addiction--Society for the Study of Addiction; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Intervention](#)
[*Psychosexual Behavior](#)
[*Sexual Risk Taking](#)

Source: PsycINFO

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

41. Addiction research centres and the nurturing of creativity: National institute on alcohol and drugs policies, Brazil.

Citation: Addiction, April 2012, vol./is. 107/4(727-732), 0965-2140;1360-0443 (Apr 2012)

Author(s): Laranjeira, Ronaldo; Mitsuhiro, Sandro Sendin

Correspondence Address: Mitsuhiro, Sandro Sendin: Psychiatry Department, Universidade Federal de Sao Paulo, Rua Botucatu, 394, Sao Paulo, Brazil, 04023061, sandro@uniad.org.br

Institution: Laranjeira, Ronaldo: Psychiatry Department, Federal University of Sao Paulo, Sao Paulo, Brazil

Language: English

Abstract: The National Institute of Public Policy for Alcohol and Other Drugs (INPAD) is based at the Federal University of Sao Paulo, Brazil, and was created to collect scientific evidence regarding epidemiology, develop new therapeutic approaches, study health economics and provide education to subsidize the proper measures to change the Brazilian scenario of alcohol and drug consumption. Policies directed towards the control of alcohol and drugs in Brazil are fragmented, poorly enforced and therefore ineffective. The unregulated market of alcohol in Brazil has contributed to the worsening health of the Brazilian population. Since 1994, INPAD has participated actively in academic debates and

discussions about alcohol and drug policies and their effects on the political welfare of the country. Many scientific papers and books have been published on this subject, and the internet and other media have provided excellent opportunities for the dissemination of specialized information to the general population. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors, Addiction--Society for the Study of Addiction; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Creativity](#)
[*Drug Addiction](#)
[*Policy Making](#)
[*Research and Development](#)

Source: PsycINFO

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

42. Other outcomes in treatments for substance-use disorders: A call for action.

Citation: Addiction, April 2012, vol./is. 107/4(725-726), 0965-2140;1360-0443 (Apr 2012)

Author(s): Tiffany, Stephen T; Friedman, Lawrence; Greenfield, Shelly F; Hasin, Deborah S; Jackson, Ron

Correspondence Address: Tiffany, Stephen T., stiffany@buffalo.edu

Institution: Tiffany, Stephen T.: University at Buffalo, State University of New York, Buffalo, NY, US

Language: English

Abstract: Reply by the current authors to the comments made by Frances K. Delboca & Jack Darkes (see record 2012-05703-005), Ambros Uchtenhagen (see record 2012-05703-006) & Gerhard Buhringer (see record 2012-05703-007) on the original articles (see record 2012-05703-003) & (see record 2012-05703-004). In some cases, the commentators agreed with our specific suggestions for outcome domains other than drug use but each also advocated the inclusion of additional domains or questioned one or more of our recommendations. Buhringer suggested that employment, legal status and housing be included as treatment outcome domains. These outcomes might be highly pertinent for many users of illicit drugs but may have little relevance for others, such as cigarette smokers. Some of the commentators disagreed directly with each other. Uchtenhagen disputed our selection of craving as a principal outcome domain, whereas Del Boca & Darkes specifically endorsed the idea of including craving. We advocate the approach advanced in our paper, that selection of outcome domains be guided by lucid and reasonable principles that apply across substance use disorders and that a systematic process be instituted to shepherd these domains into explicit assessment programs that are incorporated routinely into addiction treatments. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Clinical Trials](#)
[*Drug Dependency](#)
[*Drug Therapy](#)
[*Drug Usage](#)
[*Treatment Outcomes](#)

Source: PsycINFO

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

43. More mice or a better mouse trap? Reflections on primary outcome indices in illicit drug dependence treatment research.

Citation: Addiction, April 2012, vol./is. 107/4(723-725), 0965-2140;1360-0443 (Apr 2012)

Author(s): Donovan, Dennis M

Correspondence Address: Donovan, Dennis M., ddonovan@u.washington.edu

Institution: Donovan, Dennis M.: Alcohol and Drug Abuse Institute, Seattle, WA, US

Language: English

Abstract: Reply by the current authors to the comments made by Frances K. Delboca & Jack Darkes (see record 2012-05703-005), Ambros Uchtenhagen (see record 2012-05703-006) & Gerhard Buhringer (see record 2012-05703-007) on the original articles (see record 2012-05703-003) & (see record 2012-05703-004). While complimenting the panel's efforts, Buhringer wished there had been more results in the consensus portions of the paper. Buhringer suggested that drug use as the only primary outcome measure is a narrow and biased selection, and Uchtenhagen indicates that the statement 'drug taking behavior is the primary target for intervention' cannot be supported in light of recent developments, suggesting that substance abuse treatment needs to be evaluated within a broader context that includes factors such as psychosocial function, quality of life and patient satisfaction. Uchtenhagen raised an issue about the goal of treatment abstinence or harm minimization. The consensus panel did not endorse or advocate abstinence or harm reduction or minimization as the appropriate goal of treatment. We agree that theory should play a major role in determining measures to be included in clinical trials. However, such measures usually represent predictors, moderators and mediators of interventions' impact on subsequent drug use. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Clinical Trials](#)
[*Drug Dependency](#)
[*Drug Therapy](#)
[*Drug Usage](#)
[*Treatment Outcomes](#)

Source: PsycINFO

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

44. The mountain roared and brought forth a mouse: Comments on the results of an expert panel on standardization of drug dependence treatment trial outcome variables.

Citation: Addiction, April 2012, vol./is. 107/4(722-723), 0965-2140;1360-0443 (Apr 2012)

Author(s): Buhringer, Gerhard

Correspondence Address: Buhringer, Gerhard: Technische Universitat Dresden, Addiction Research Unit, Chemnitz Str. 46, Dresden, Germany, D-01187, buhringer@ift.de

Institution: Buhringer, Gerhard: Technische Universitat Dresden, Addiction Research Unit, Dresden, Germany

Language: English

Abstract: Comments on an article by Dennis M. Donovan et al. (see record 2012-05703-003) & Stephen T. Tiffany et al. (see record 2012-05703-004). Drug use as the only primary outcome measure, as suggested by the panel, is a narrow and biased selection. Even for maintenance treatment, beyond progress in the reduction of illicit use, improvements in physical and mental health, housing, new social contacts and work improvements are seen as core outcome variables. The proposed somewhat simple definition 'interventions that reduce drug use by half' leaves room for further elaboration of such a relevant topic. First, most patients do not use one single drug but show a complex pattern of multiple substance use disorders, and a definition of clinical meaningfulness should consider this. Secondly, the distinction between absolute and relative progress criteria might be helpful, full cannabis abstinence can be seen as a behavior which qualifies for reaching an

absolute criterion for a clinical meaningful success, but for a multimorbid, homeless, socially deprived cannabis user some progress in several domains might already be seen as relative success. The authors urge greater attention from journal editors, funding agencies and professional societies to implement standard outcome measures more effectively, but such appeals did not change anything in the past. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: The Authors, Addiction--Society for the Study of Addiction; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Clinical Trials](#)
[*Drug Dependency](#)
[*Drug Therapy](#)
[*Drug Usage](#)
[*Treatment Outcomes](#)
Source: PsycINFO
Full Text: Available in *fulltext* at [Wiley](#)

45. How to measure outcome in clinical trials of substance abuse treatment.

Citation: Addiction, April 2012, vol./is. 107/4(720-721), 0965-2140;1360-0443 (Apr 2012)
Author(s): Uchtenhagen, Ambros
Correspondence Address: Uchtenhagen, Ambros: Research Institute for Public Health and Addiction, Konradstrasse 32, Zurich, Switzerland, CH-8031, uchtenhagen@isgf.uzh.ch
Institution: Uchtenhagen, Ambros: Research Institute for Public Health and Addiction, Zurich, Switzerland
Language: English
Abstract: Comments on an article by Dennis M. Donovan et al. (see record 2012-05703-003) & Stephen T. Tiffany et al. (see record 2012-05703-004). Donovan et al. move from a restrictive title to general conclusions about substance abuse treatment outcomes, and from a single common indicator to a range of trial specific measures. The statement drug-taking behavior is the primary target for interventions cannot be supported in the light of recent developments. The paper by Donovan et al. assumes that all tobacco use is harmful and therefore treatment should aim at complete abstinence. This is in contrast with developments to reduce harm from tobacco smoking by effective replacement therapies or by reducing the number of cigarettes smoked. Tiffany et al. propose those responding to five criteria serving as a guideline, and identified five candidates for inclusion as primary outcomes in treatment studies. There are doubts about craving as a candidate primary outcome for all clinical trials. Both the papers provide a rich overview of relevant work being done in the past. This may have impeded an attempt to rethink the problem anew. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Country of Publication: HOLDER: The Authors, Addiction--Society for the Study of Addiction; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Clinical Trials](#)
[*Drug Dependency](#)
[*Drug Therapy](#)
[*Drug Usage](#)
[*Treatment Outcomes](#)
Source: PsycINFO
Full Text: Available in *fulltext* at [Wiley](#)

46. 'Nothing is more practical than a good theory': Outcome measures in addictions treatment research.

Citation: Addiction, April 2012, vol./is. 107/4(719-720), 0965-2140;1360-0443 (Apr 2012)
Author(s): Del Boca, Frances K; Darkes, Jack

Correspondence Address: Del Boca, Frances K.: Department of Community Medicine and Health Care, University of Connecticut Health Center, Farmington, CT, US, 06030, delboca_chicago@sbcglobal.net

Institution: Del Boca, Frances K.: Department of Community Medicine and Health Care, University of Connecticut Health Center, Farmington, CT, US

Language: English

Abstract: Comments on the articles by Dennis M. Donovan et al. (see record 2012-05703-003) & Stephen T. Tiffany et al. (see record 2012-05703-004). Donovan et al. underscore the differences among substances in consequences of use, and they argue persuasively that the selection of particular substance use measures should derive from features of the interventions under investigation, including presumed mechanisms of action, target substances, anticipated durations of effects and intended beneficiaries. According to Tiffany et al. it is the consequences of substance use for the individual, significant others and society, rather than the actual behaviors, that are the basis of concerns, and the choice of treatment outcomes should reflect this reality. As Donovan et al. noted, studies can be compared in terms of metrics other than specific outcome measures. Nevertheless, to facilitate comparisons we recommend the use of versatile assessment methods that can generate a variety of measures across different time frames. As described by Donovan et al. many specific consumptive measures provide indices of sustained behavior change. However, other indicators of treatment efficacy may also, depending on the investigation, provide insights into how recovery is influenced by different treatment modalities. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Clinical Trials](#)
[*Drug Dependency](#)
[*Drug Therapy](#)
[*Drug Usage](#)
[*Treatment Outcomes](#)

Source: PsycINFO

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

47. Beyond drug use: A systematic consideration of other outcomes in evaluations of treatments for substance use disorders.

Citation: Addiction, April 2012, vol./is. 107/4(709-718), 0965-2140;1360-0443 (Apr 2012)

Author(s): Tiffany, Stephen T; Friedman, Lawrence; Greenfield, Shelly F; Hasin, Deborah S; Jackson, Ron

Correspondence Address: Tiffany, Stephen T.: Department of Psychology, University at Buffalo, SUNY, 228 Park, Buffalo, NY, US, 14260, stiffany@buffalo.edu

Institution: Tiffany, Stephen T.: University at Buffalo, State University of New York, Buffalo, NY, US

Language: English

Abstract: Across the addictions field, the primary outcome in treatment research has been reduction in drug consumption. A comprehensive view of the impact of substance use disorders on human functioning suggests that effective treatments should address the many consequences and features of addiction beyond drug use, a recommendation forwarded by multiple expert panels and review papers. Despite recurring proposals, and a compelling general rationale for moving beyond drug use as the sole standard for evaluating addiction treatment, the field has yet to adopt any core set of 'other' measures that are routinely incorporated into treatment research. Among the many reasons for the limited impact of previous proposals has been the absence of a clear set of guidelines for selecting candidate outcomes. This paper is the result of the deliberations of a panel of substance abuse treatment and research experts convened by the National Institute on Drug Abuse to

discuss appropriate outcome measures for clinical trials of substance abuse treatments. This paper provides an overview of previous recommendations and outlines specific guidelines for consideration of candidate outcomes. A list of outcomes meeting those guidelines is described and illustrated in detail with two outcomes: craving and quality of life. The paper concludes with specific recommendations for moving beyond the outcome listing offered in this paper to promote the programmatic incorporation of these outcomes into treatment research. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors, Addiction--Society for the Study of Addiction; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Craving](#)
[*Drug Abuse](#)
[*Drug Therapy](#)
[*Quality of Life](#)
[*Treatment Outcomes](#)

Source: PsycINFO

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

48. Primary outcome indices in illicit drug dependence treatment research: Systematic approach to selection and measurement of drug use end-points in clinical trials.

Citation: Addiction, April 2012, vol./is. 107/4(694-708), 0965-2140;1360-0443 (Apr 2012)

Author(s): Donovan, Dennis M; Bigelow, George E; Brigham, Gregory S; Carroll, Kathleen M; Cohen, Allan J; Gardin, John G; Hamilton, John A; Huestis, Marilyn A; Hughes, John R; Lindblad, Robert; Marlatt, G. Alan; Preston, Kenzie L; Selzer, Jeffrey A; Somoza, Eugene C; Wakim, Paul G; Wells, Elizabeth A

Correspondence Address: Donovan, Dennis M.: Alcohol and Drug Abuse Institute, University of Washington, 1107 NE 45th Street, Suite 120, Seattle, WA, US, 98105-4631, ddonovan@u.washington.edu

Institution: Donovan, Dennis M.: Alcohol and Drug Abuse Institute, University of Washington, Seattle, WA, US

Language: English

Abstract: Aims: Clinical trials test the safety and efficacy of behavioral and pharmacological interventions in drug-dependent individuals. However, there is no consensus about the most appropriate outcome(s) to consider in determining treatment efficacy or on the most appropriate methods for assessing selected outcome(s). We summarize the discussion and recommendations of treatment and research experts, convened by the US National Institute on Drug Abuse, to select appropriate primary outcomes for drug dependence treatment clinical trials, and in particular the feasibility of selecting a common outcome to be included in all or most trials. Methods: A brief history of outcomes employed in prior drug dependence treatment research, incorporating perspectives from tobacco and alcohol research, is included. The relative merits and limitations of focusing on drug-taking behavior, as measured by self-report and qualitative or quantitative biological markers, are evaluated. Results: Drug-taking behavior, measured ideally by a combination of self-report and biological indicators, is seen as the most appropriate proximal primary outcome in drug dependence treatment clinical trials. Conclusions: We conclude that the most appropriate outcome will vary as a function of salient variables inherent in the clinical trial, such as the type of intervention, its target, treatment goals (e.g. abstinence or reduction of use) and the perspective being taken (e.g. researcher, clinical program, patient, society). It is recommended that a decision process, based on such trial variables, be developed to guide the selection of primary and secondary outcomes as well as the methods to assess them. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Clinical Trials](#)

*Drug Dependency
 *Drug Therapy
 *Drug Usage
 *Treatment Outcomes

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

49. Why should we need a European Federation of Addiction Societies?

Citation: Addiction, April 2012, vol./is. 107/4(692-693), 0965-2140;1360-0443 (Apr 2012)
Author(s): Mann, Karl F
Correspondence Address: Mann, Karl F.: University of Heidelberg, Central Institute of Mental Health, Square J5, Mannheim, Germany, 68159, sucht@zi-mannheim.de
Institution: Mann, Karl F.: University of Heidelberg, Central Institute of Mental Health, Mannheim, Germany
Language: English
Abstract: This issue of Addiction focuses on the need of European Federation of Addiction Societies. National societies for the study of addiction have been established in almost all European countries. However, as yet very little concerted action exists. A European Federation of Addiction Societies could play a leading role in fostering collaboration within Europe and beyond. The coordination and extension of lobbying activities for more funding of addiction research on a European level would be another important goal of such a society. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Country of Publication: HOLDER: The Authors, Addiction--Society for the Study of Addiction; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Addiction
 *Research and Development
 *Society
 Collaboration
Source: PsycINFO
Full Text: Available in *fulltext* at [Wiley](#)

50. In the name of treatment: Ending abuses in compulsory drug detention centers.

Citation: Addiction, April 2012, vol./is. 107/4(689-691), 0965-2140;1360-0443 (Apr 2012)
Author(s): Jurgens, Ralf; Csete, Joanne
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Institution: Jurgens, Ralf: HIV/AIDS, Health, Policy and Human Rights, Mille-Isles, PQ, Canada
Language: English
Abstract: This issue of Addiction focuses on ending abuses in compulsory drug detention centers. In some Asian countries people who use illicit drugs and those suspected of drug use are detained involuntarily for long periods in drug treatment centers that do not provide evidence-based drug treatment and regularly commit human rights abuses. Recent reports have brought to light a wide range of human rights abuses committed in these centers in the name of treatment. Drug treatment centers' are better referred to as compulsory drug detention centers. People may be put into such centers without being properly charged or brought before a court or tribunal to answer charges or challenge the sentence of detention, as should happen in criminal proceedings. While practices in compulsory drug treatment centers are largely shrouded in secrecy, the few investigative reports available underscore that treatment is a cruel misnomer. Research in drug detention centers similarly raises ethical dilemmas. It is doubtful that informed consent to participate in research can be truly obtained in settings where people consistently fear arbitrary use of

force and deprivation of all kinds. Researchers should be wary of undertaking any work that would lend legitimacy to these institutions. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Therapy](#)
[*Human Rights](#)
[*Legal Detention](#)

Source: PsycINFO

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

51. Stress-induced activation of the dynorphin/kappa -opioid receptor system in the amygdala potentiates nicotine conditioned place preference.

Citation: The Journal of Neuroscience, January 2012, vol./is. 32/4(1488-1495), 0270-6474;1529-2401 (Jan 25, 2012)

Author(s): Smith, Jeffrey S; Schindler, Abigail G; Martinelli, Emma; Gustin, Richard M; Bruchas, Michael R; Chavkin, Charles

Correspondence Address: Chavkin, Charles: Department of Pharmacology, University of Washington, School of Medicine, Box 357280, Seattle, WA, US, 98195-7280, cchavkin@u.washington.edu

Institution: Smith, Jeffrey S.: Department of Pharmacology, University of Washington, Seattle, WA, US

Language: English

Abstract: Many smokers describe the anxiolytic and stress-reducing effects of nicotine, the primary addictive component of tobacco, as a principal motivation for continued drug use. Recent evidence suggests that activation of the stress circuits, including the dynorphin/kappa -opioid receptor system, modulates the rewarding effects of addictive drugs. In the present study, we find that nicotine produced dose-dependent conditioned place preference (CPP) in mice. kappa -Receptor activation, either by repeated forced swim stress or U50,488 (5 or 10 mg/kg, i.p.) administration, significantly potentiated the magnitude of nicotine CPP. The increase in nicotine CPP was blocked by the kappa -receptor antagonist norbinaltorphimine (norBNI) either systemically (10 mg/kg, i.p.) or by local injection in the amygdala (2.5 μ g) without affecting nicotine reward in the absence of stress. U50,488 (5 mg/kg, i.p.) produced anxiety-like behaviors in the elevated-plus maze and novel object exploration assays, and the anxiety-like behaviors were attenuated both by systemic nicotine (0.5 mg/kg, s.c.) and local injection of norBNI into the amygdala. Local norBNI injection in the ventral posterior thalamic nucleus (an adjacent brain region) did not block the potentiation of nicotine CPP or the anxiogenic-like effects of kappa -receptor activation. These results suggest that the rewarding effects of nicotine may include a reduction in the stress-induced anxiety responses caused by activation of the dynorphin/kappa -opioid system. Together, these data implicate the amygdala as a key region modulating the appetitive properties of nicotine, and suggest that kappa -opioid antagonists may be useful therapeutic tools to reduce stress-induced nicotine craving. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The authors; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Amygdala](#)
[*Dynorphins](#)
[*Nicotine](#)
[*Place Conditioning](#)
[Mice](#)

Source: PsycINFO

52. Early exposure to alcohol leads to permanent impairment of dendritic excitability in neocortical pyramidal neurons.

Citation: The Journal of Neuroscience, January 2012, vol./is. 32/4(1377-1382), 0270-6474;1529-2401 (Jan 25, 2012)

Author(s): Granato, Alberto; Palmer, Lucy M; De Giorgio, Andrea; Tavian, Daniela; Larkum, Matthew E

Correspondence Address: Granato, Alberto: Department of Psychology, Catholic University, Largo A. Gemelli 1, Milan, Italy, 20123, alberto.granato@unicatt.it

Institution: Granato, Alberto: Department of Psychology, Catholic University, Milan, Italy

Language: English

Abstract: Exposure to alcohol in utero is a well known cause of mental retardation in humans. Using experimental models of fetal alcohol spectrum disorder, it has been demonstrated that cortical pyramidal neurons and their projections are profoundly and permanently impaired. Yet, how the functional features of these cells are modified and how such modifications impact cognitive processes is still unknown. To address this, we studied the intrinsic electrophysiological properties of pyramidal neurons in young adult rats (P30-P60) exposed to ethanol inhalation during the first week of postnatal life (P2-P6). Dual whole-cell recordings from the soma and distal apical dendrites were performed and, following the injection of depolarizing current into the dendrites, layer 5 neurons from ethanol-treated (Et) animals displayed a lower number and a shorter duration of dendritic spikes, attributable to a downregulation of calcium electrogenesis. As a consequence, the mean number of action potentials recorded at the soma after dendritic current injection was also lower in Et animals. No significant differences between Et and controls were observed in the firing pattern elicited in layer 5 neurons by steps of depolarizing somatic current, even though the firing rate was significantly lower in Et animals. The firing pattern and the firing rate of layer 2/3 neurons were not affected by alcohol exposure. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The authors; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cognitive Processes](#)
[*Dendrites](#)
[*Mental Retardation](#)
[*Action Potentials](#)
[*Pyramidal Neurons](#)
[Alcoholism](#)
[Animal Models](#)
[Rats](#)

Source: PsycINFO

53. Genetic modulation of plasma NPY stress response is suppressed in substance abuse: Association with clinical outcomes.

Citation: Psychoneuroendocrinology, April 2012, vol./is. 37/4(554-564), 0306-4530 (Apr 2012)

Author(s): Xu, Ke; Hong, Kwangik Adam; Zhou, Zhifeng; Hauger, Richard L; Goldman, David; Sinha, Rajita

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Institution: Xu, Ke: Department of Psychiatry, School of Medicine, Yale University, New Haven, CT, US

Language: English

Abstract: Background: Neuropeptide Y (NPY) is involved in stress regulation. Genetic variations predict plasma NPY and neural correlates of emotion and stress. We examined whether the functional NPY haplotype modulates stress-induced NPY and anxiety responses, and if

plasma NPY stress responses are associated with substance dependence outcomes. Methods: Thirty-seven treatment-engaged, abstinent substance dependent (SD) patients and 28 healthy controls (HCs) characterized on NPY diplotypes (HH: high expression; HLLL: intermediate/ low expression) were exposed to stress, alcohol/drug cues and neutral relaxing cues, using individualized guided imagery, in a 3-session laboratory experiment. Plasma NPY, heart rate and anxiety were assessed. Patients were prospectively followed for 90-days post-treatment to assess relapse outcomes. Results: HH individuals showed significantly lower stress-induced NPY with greater heart rate and anxiety ratings, while the HLLL group showed the reverse pattern of NPY, anxiety and heart rate responses. This differential genetic modulation of NPY stress response was suppressed in the SD group, who showed no stress-related increases in NPY and higher heart rate and greater anxiety, regardless of diplotype. Lower NPY predicted subsequent higher number of days and greater amounts of post-treatment drug use. Conclusion: These preliminary findings are the first to document chronic drug abuse influences on NPY diplotype expression where NPY diplotype modulation of stress-related plasma NPY, heart rate and anxiety responses was absent in the substance abuse sample. The finding that lower stress-related NPY is predictive of greater relapse severity provides support for therapeutic development of neuropeptide Y targets in the treatment of substance use disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Anxiety](#)
[*Drug Abuse](#)
[*Neuropeptide Y](#)
[Stress](#)
[Haplotype](#)

Source: PsycINFO

54. Motivational intervention increases exercise in schizophrenia and co-occurring substance use disorders.

Citation: Schizophrenia Research, March 2012, vol./is. 135/1-3(204-205), 0920-9964 (Mar 2012)

Author(s): Beebe, Lora Humphrey; Smith, Kathleen; Burk, Renee; McIntyre, Kelly; Dessieux, Olivera; Tavakoli, Abbas; Velligan, Dawn

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Institution: Beebe, Lora Humphrey: University of Tennessee, Knoxville, TN, US

Language: English

Abstract: In this letter, we completed a randomized controlled trial (RCT) testing effects of a motivational intervention on exercise behavior, published elsewhere. We report results from a sub-sample of 17 outpatients with schizophrenia spectrum disorders (SSDs) and co occurring substance abuse. Subjects received motivational intervention or time and attention control, then completed a 16 week walking program. Most common diagnostic combination: schizoaffective and polysubstance abuse. No statistically significant baseline differences were observed, with the exception of assignment to Program for Assertive Community treatment (PACT), a 24 h intensive support program for the severely ill. Result shows attendance, persistence and minutes walked/ month. Differences were statistically significant for minutes walked month one, minutes walked month two and percentage of groups attended month one. Attendance differences approached significance during month two. Subjects in the experimental group attended more walking groups, for more weeks and walked more minutes every month than controls, but walking group attendance declined over time for both groups. This report is among the first to examine interventions to enhance exercise motivation in SSDs and co-occurring substance abuse, and our intervention shows promise--all outcomes in the predicted direction and significant differences during months one and two. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Exercise](#)
[*Intervention](#)
[*Motivation](#)
[*Schizophrenia](#)

Source: PsycINFO

55. Projections of alcohol-related deaths in England and Wales--Tragic toll or potential prize?

Citation: The Lancet, February 2012, vol./is. 379/9817(687-688), 0140-6736 (Feb 25, 2012)

Author(s): Sheron, Nick; Gilmore, Ian; Parsons, Camille; Hawkey, Chris; Rhodes, Jon

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Institution: Sheron, Nick: NIHR, Biomedical Research Unit (Nutrition, Diet and Lifestyle),, University Hospital Southampton NHS Foundation Trust, Southampton, United Kingdom

Language: English

Abstract: The latest alcohol-related harm statistics from the UK's Office of National Statistics (ONS) were released on Jan 26, 2012, and provide an opportunity to re-evaluate the projections of alcohol-related liver deaths that we previously reported in this journal with 2008 data. Using the standard ONS definition, alcohol-related liver deaths in England and Wales fell from 6470 in 2008 to 6230 in 2009, but then increased again to 6317 in 2010. Alcohol-related liver deaths thus account for around a quarter of total alcohol-related deaths. Current UK Government policy relies heavily on a voluntary "responsibility deal" with commitments made by alcohol producers and retailers to reduce consumption and harm. The UK Government will also have to withstand powerful lobbying from the drinks industry, but the potential prize of reversing this tragic toll of alcohol-related deaths is there for the taking. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Drinking Patterns](#)
[*Alcoholism](#)
[*Death and Dying](#)
[*Government Policy Making](#)
[*Harm Reduction](#)
[Statistics](#)

Source: PsycINFO

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

56. Efficacy of a targeted cognitive-behavioral treatment program for cannabis use disorders (CANDIS*).

Citation: European Neuropsychopharmacology, April 2012, vol./is. 22/4(267-280), 0924-977X (Apr 2012)

Author(s): Hoch, E; Noack, R; Henker, J; Pixa, A; Hofler, M; Behrendt, S; Buhringer, G; Wittchen, H.-U

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Institution: Hoch, E.: Institute of Clinical Psychology and Psychotherapy, Technische Universitat Dresden, Dresden, Germany

Language: English

Abstract: Aims: To examine the efficacy, 3- and 6-month follow-up effects of a psychological treatment for older adolescents and adults with DSM-IV cannabis use disorders. The program was tailored to the needs of this patient population. Experimental procedures: A randomized controlled clinical trial of 122 patients aged 16 to 44 years with DSM-IV cannabis dependence as the main substance use diagnosis was conducted. Patients were randomly assigned to either Active Treatment (AT, n = 90) or a Delayed Treatment Control group (DTC, n = 32). Treatment consisted of 10 sessions of therapy, detailed in a strictly enforced manual. Assessments were conducted at baseline, during each therapy session, at post treatment and at follow-up assessments at 3 and 6 months. Results: The treatment retention rate was 88%. Abstinence was achieved in 49% of AT patients and in 13% of those in DTC ($p < 0.001$; intend-to-treat (ITT) analysis). Further, AT patients improved significantly ($p < 0.001$) in the frequency of cannabis use per week, addiction severity, number of disability days, and overall level of psychopathology. Program effects were maintained over a 3-month- (abstinence rate: 51%) and 6-month follow-up (45%) period. Conclusion: The treatment program is effective in obtaining abstinence as well as reducing cannabis use and improves the associated social and mental health burden. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V. and ECNP; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabis
*Cognitive Behavior Therapy
*Drug Therapy
*Mental Disorders
*Treatment Effectiveness Evaluation
Side Effects (Drug)

Source: PsycINFO

57. 50-kHz calls in rats: Effects of MDMA and the 5-HT1A receptor agonist 8-OH-DPAT.

Citation: Pharmacology, Biochemistry and Behavior, April 2012, vol./is. 101/2(258-264), 0091-3057 (Apr 2012)

Author(s): Sadananda, Monika; Natusch, Claudia; Karrenbauer, Britta; Schwarting, Rainer K. W

Correspondence Address: Schwarting, Rainer K. W.: Experimental and Physiological Psychology, Philipps-University of Marburg, Gutenbergstr. 18, Marburg, Germany, 35032, schwarti@staff.uni-marburg.de

Institution: Sadananda, Monika: Department of Biotechnology, St. Aloysius College, Mangalore, India

Language: English

Abstract: In recent years, 50-kHz ultrasonic vocalizations of laboratory rats have become increasingly important behavioral measures in research on emotion and motivation, since these calls may help to study appetitive subjective states, for example in relation to addiction. Among others, 50-kHz calls occur when rats experience or expect rewards, including drugs of abuse, and it is assumed that these calls depend on dopamine function, especially in the meso-limbic system. One established means to induce 50-kHz calls is to challenge rats with D-amphetamine, a psychomotor stimulant, which acts largely by boosting dopamine and noradrenaline function in the brain. In a 1st experiment, we studied whether another psycho-stimulatory amphetamine, namely the derivative 3,4-methylene-dioxymethamphetamine (MDMA, Ecstasy), could also enhance 50-kHz calls by using an activity box and testing conditions, which had previously been found to be appropriate in case of D-amphetamine. In support of previous work, we found that MDMA (2.5, 5, 10 mg/kg, ip) dose-dependently increased locomotion and center time, together with decreases in rearing activity, but the drug did not elicit 50-kHz calls. Assuming that this lack of effect is due to the drug's substantial proserotonergic effects in the brain, which may inhibit 50-kHz calls, we performed a 2nd experiment where we tested the serotonin 5-HT1A receptor agonist 8-hydroxy-2-tetralin (8-OH-DPAT; 0.05, 0.5, 2.5 mg/kg, ip). This drug dose-dependently stimulates serotonin autoreceptors and

heteroreceptors, can act in a psycho-stimulatory way and can enhance dopamine function. In the activity box, 8-OH-DPAT increased locomotor activity (0.5, 2.5 mg/kg) and decreased rearing (2.5 mg/kg); that is, the drug seemed to share some psycho-stimulatory effects with MDMA. Unlike MDMA, 8-OH-DPAT enhanced 50-kHz calls in a dose-dependent way, namely only with the 0.5 mg/kg dose. These results are discussed with respect to their possible neurochemical mechanisms, especially on 5-HT and dopamine in the brain. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Dopamine
 *Drug Addiction
 *Methylenedioxymethamphetamine
 *Motivation
 Rats
Source: PsycINFO

58. Characterization of a semi-rapid method for assessing delay discounting in rodents.

Citation: Pharmacology, Biochemistry and Behavior, April 2012, vol./is. 101/2(187-192), 0091-3057 (Apr 2012)

Author(s): Foscue, Ethan P; Wood, Kathryne N; Schramm-Sapyta, Nicole L

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Institution: Foscue, Ethan P.: Duke University Medical Center, Department of Psychiatry and Behavioral Sciences, Durham, NC, US

Language: English

Abstract: Delay discounting is a key component of many psychiatric disorders, including drug addiction, compulsive gambling, ADHD, and obesity. However, its underlying mechanisms are not yet fully characterized. One impediment to full characterization of such mechanisms is the fact that rodent models of the task are often complicated and involve extended training of subjects, often requiring more than a month before a stable baseline is obtained. We have therefore characterized a version of the rodent delay discounting task which generates data more quickly than most other published versions. In this version of the task, learning of the operant response is established prior to introduction of the delay component, and delay is tested across subsequent daily sessions with a single delay length per day. We demonstrate here that this version generates a delay discounting curve similar to many published tasks, and is sensitive to changes in reward magnitude and to chronic treatment with cocaine. Furthermore, we present a detailed description of the within-session patterns of behavior in the task, which provides evidence of within-session learning and establishment of stable response patterns. This faster version of the delay discounting task will facilitate future studies involving pharmacological, electrophysiological, and other mechanistic studies of the underlying basis of this important disease process. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cocaine
 *Decision Making
 *Delay of Gratification
 *Rewards
 *Rodents
Source: PsycINFO

59. "QT interval screening in methadone maintenance treatment: Report of a SAMHSA expert panel": Erratum.

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|--------------------------|---|
| Citation: | Journal of Addictive Diseases, January 2012, vol./is. 31/1(91), 1055-0887;1545-0848 (Jan 2012) |
| Author(s): | Martin, Judith A; Campbell, Anthony; Killip, Thomas; Kotz, Margaret; Krantz, Mori J; Kreek, Mary Jeanne; McCarroll, Brian A; Mehta, Davendra; Payte, J. Thomas; Stimmel, Barry; Taylor, Trusandra; Wilford, Bonnie B |
| Institution: | Martin, Judith A.: BAART Turk Street Clinic, San Francisco, CA, US |
| Language: | English |
| Abstract: | Reports an error in "QT interval screening in methadone maintenance treatment: Report of a SAMHSA expert panel" by Judith A. Martin, Anthony Campbell, Thomas Killip, Margaret Kotz, Mori J. Krantz, Mary Jeanne Kreek, Brian A. McCarroll, Davendra Mehta, J. Thomas Payte, Barry Stimmel, Trusandra Taylor and Bonnie B. Wilford (Journal of Addictive Diseases, 2011[Oct], Vol 30[4], 283-306). In the original article, Mark C.P. Haigney, MD, FAHA, was mistakenly omitted from the list of the authors. The authors of the report are Judith A. Martin, MD, Anthony Campbell, RPh, DO, Thomas Killip, MD, Margaret Kotz, DO, Mori J. Krantz, MD, Mary Jeanne Kreek, MD, Brian A. McCarroll, DO, MS, Davendra Mehta, MD, PhD, J. Thomas Payte, MD, Barry Stimmel, MD, FASAM, Trusandra Taylor, MD, MPH, Mark C.P. Haigney, MD, FAHA, and Bonnie B. Wilford, MS. The online version of this article has been corrected to include all authors. (The following abstract of the original article appeared in record 2011-24848-002). In an effort to enhance patient safety in opioid treatment programs, the Substance Abuse and Mental Health Services Administration convened a multi-disciplinary Expert Panel on the Cardiac Effects of Methadone. Panel members (Appendix A) reviewed the literature, regulatory actions, professional guidance's, and opioid treatment program experiences regarding adverse cardiac events associated with methadone. The Panel concluded that, to the extent possible, every opioid treatment program should have a universal Cardiac Risk Management Plan (incorporating clinical assessment, electrocardiogram assessment, risk stratification, and prevention of drug interactions) for all patients and should strongly consider patient-specific risk minimization strategies (such as careful patient monitoring, obtaining electrocardiograms as indicated by a particular patient's risk profile, and adjusting the methadone dose as needed) for patients with identified risk factors for adverse cardiac events. The Panel also suggested specific modifications to informed consent documents, patient education, staff education, and methadone protocols. (PsycINFO Database Record (c) 2012 APA, all rights reserved) |
| Publication Type: | Journal; Peer Reviewed Journal |
| Subject Headings: | *Mental Health *Methadone Maintenance *Opiates *Screening *Treatment Drug Abuse |
| Source: | PsycINFO |

60. President's message.

| | |
|---------------------|---|
| Citation: | Journal of Addictive Diseases, January 2012, vol./is. 31/1(89-90), 1055-0887;1545-0848 (Jan 2012) |
| Author(s): | Waitz, Margot |
| Institution: | Waitz, Margot: American Osteopathic Academy of Addiction Medicine, IL, US |
| Language: | English |
| Abstract: | The Controlled Substances Act classifies drugs and the Drug Enforcement Agency (DEA) is charged with the task of enforcing the appropriate use of these scheduled drugs. According to the Controlled Substances Act, marijuana is a Schedule I drug that is not |

considered legitimate for medical use. Physicians may not prescribe Schedule I drugs. Physicians obtain DEA licenses that allow them to prescribe medications that are Schedule II through Schedule V. Marijuana has been found to contain active ingredients with the potential to relieve pain, control nausea, stimulate appetite, and decrease ocular pressure. Recently, the American Osteopathic Academy of Addiction Medicine (AOAAM) developed its position paper on medical marijuana. Effective July 1, 2011, the AOAAM was awarded a 3-year grant, "The Prescribers' Clinical Support System for Opioids" (PCSS-O), from the Center for Substance Abuse Treatment/Substance Abuse and Mental Health Services Administration. This grant funds a program that will use innovative approaches to educating all clinicians who prescribe opioid. The AOAAM meets annually at the American Osteopathic Association Annual Convention, which is held in the late fall each year. The 2012 convention will be held in San Diego, California. Our Academy provides an excellent educational program, as well as the opportunity to meet colleagues and experts in the field. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
 *Drug Rehabilitation
 *Marijuana
Source: PsycINFO

61. Assessment of risky injection practices associated with hepatitis B, hepatitis C, and human immunodeficiency virus and using the Blood-borne Virus Transmission Risk Assessment Questionnaire.

Citation: Journal of Addictive Diseases, January 2012, vol./is. 31/1(80-88), 1055-0887;1545-0848 (Jan 2012)

Author(s): Reynolds, Grace L; Fisher, Dennis G; Napper, Lucy E

Correspondence Address: Reynolds, Grace L.: Center for Behavioral Research and Services, California State University, Long Beach, 1090 Atlantic Avenue, Long Beach, CA, US, 90813, greynol2@csulb.edu

Institution: Reynolds, Grace L.: Center for Behavioral Research and Services, California State University, Long Beach, Long Beach, CA, US

Language: English

Abstract: Risky injection practices among injection drug users (IDUs) contribute to the spread of blood-borne infections such as human immunodeficiency virus, hepatitis B, and hepatitis C. The Blood-borne Virus Transmission Risk Assessment Questionnaire (BBV-TRAQ) was developed in Australia to determine risk behaviors for specific infections. Blood testing for human immunodeficiency virus, hepatitis B, and hepatitis C was performed on all participants, and data on blood tests were linked to questionnaires. The BBV-TRAQ was administered to 242 current and former injection drug users in Long Beach, California, and the Long Beach data were compared with the original Australian data. In the comparison of the mean scores on the three subscales and total scores on the BBV-TRAQ between the samples, means for all three subscales and the total BBV-TRAQ score were significantly different, with Long Beach scores consistently lower than the Australian sample. The injecting and sexual risk subscales were significantly different across levels of AIDS risk perception for all three types of injectors; however, the other skin penetration practices subscale had no significant association with AIDS risk perception for any of the injection drug user groups. Despite recent efforts to educate injectors about the risks associated with practices captured by the other skin penetration practices subscale, such as tattooing and sharing razors, this subscale does not have an association with AIDS risk perception. injection drug users in Australia may have better access to health care, giving their self-report of infection greater validity than the California sample. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Hepatitis](#)
[*HIV](#)
[*Injections](#)
[*Risk Taking](#)
[Drug Abuse](#)
[Intravenous Drug Usage](#)
Source: PsycINFO

62. Comparison of substance use milestones in cannabis- and cocaine-dependent patients.

Citation: Journal of Addictive Diseases, January 2012, vol./is. 31/1(60-66), 1055-0887;1545-0848 (Jan 2012)
Author(s): Horey, Jonathan T; Mariani, John J; Cheng, Wendy Y; Bisaga, Adam; Sullivan, Maria; Nunes, Edward; Levin, Frances R
Correspondence Address: Horey, Jonathan T.: Columbia University, 16 East 60th Street, Suite 400, New York, NY, US, 10022, jth2014@columbia.edu
Institution: Horey, Jonathan T.: Division on Substance Abuse, New York Psychiatric Institute, New York, NY, US
Language: English
Abstract: Objectives: To compare the progression of substance use milestones between cocaine- and cannabis-dependent patients. Methods: Using data gathered from two separate clinical studies for treatment of cocaine dependence and cannabis dependence, 130 cannabis-dependent and 112 cocaine-dependent individuals were compared on milestones related to their substance use. Results: In cannabis- vs. cocaine-dependent patients, the mean age of first use, regular use and first treatment contact differed significantly. No statistically significant differences were found between the two groups for other measured milestones. Conclusions: These results differ from most epidemiologic studies that suggest cocaine users progress more rapidly to regular use and treatment contact. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Cannabis](#)
[*Cocaine](#)
[*Disease Course](#)
[*Drug Abuse](#)
[*Drug Dependency](#)
Source: PsycINFO

63. Addiction in developmental perspective: Influence of conduct disorder severity, subtype, and attention-deficit hyperactivity disorder on problem severity and comorbidity in adults with opioid dependence.

Citation: Journal of Addictive Diseases, January 2012, vol./is. 31/1(45-59), 1055-0887;1545-0848 (Jan 2012)
Author(s): Carpentier, Pieter-Jan; Knapen, Lieke J. M; van Gogh, Mijke T; Buitelaar, Jan K; De Jong, Cornelis A. J
Correspondence Address: Carpentier, Pieter-Jan, Nieuwe Erven 24, Vught, Netherlands, 5263AR, pjbcarpentier@gmail.com
Institution: Carpentier, Pieter-Jan: Novadic-Kentron, Network for Addiction Treatment Services, Vught, Netherlands
Language: English
Abstract: This retrospective cross-sectional study examines whether conduct disorder and attention deficit hyperactivity disorder are associated with problem severity and psychiatric

comorbidity in 193 middle-aged, opioid-dependent patients. Conduct disorder history, attention deficit hyperactivity disorder, psychiatric comorbidity, and problem severity were assessed by structured interviews and validated instruments. A conduct disorder history was confirmed in 116 (60.1%) participants. Conduct disorder patients had significantly higher problem severity scores, more frequent comorbid substance use disorders, and more severe psychiatric comorbidity. Attention deficit hyperactivity disorder was found to increase the risk for psychiatric comorbidity. Conduct disorder persistence is a useful model for elucidating complex psychiatric comorbidity of opioid-dependent patients. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Attention Deficit Disorder with Hyperactivity](#)
[*Comorbidity](#)
[*Conduct Disorder](#)
[*Drug Dependency](#)
[*Opiates](#)
[Drug Addiction](#)
[Severity \(Disorders\)](#)
[Subtypes \(Disorders\)](#)

Source: PsycINFO

64. Cognitive and social development in preschool children born to women using substances.

Citation: Journal of Addictive Diseases, January 2012, vol./is. 31/1(29-44), 1055-0887;1545-0848 (Jan 2012)

Author(s): Irner, Tina Birk; Teasdale, Thomas William; Olofsson, May

Correspondence Address: Irner, Tina Birk: Family Center, Department of Obstetrics and Gynaecology, Copenhagen University Hospital, Hvidovre, Kettegard Alle 30, Hvidovre, Denmark, 2650, tina.irner@psy.ku.dk

Institution: Irner, Tina Birk: Family Center, Department of Obstetrics and Gynaecology, Copenhagen University Hospital, Hvidovre, Hvidovre, Denmark

Language: English

Abstract: Prenatal substance exposure is associated with physical birth defects and increased risk of regulatory and neuropsychological difficulties of children born to mothers using substances while pregnant. Myriad factors, such as maternal psychopathology, stress, and poor living circumstances, may influence childhood development in addition to the teratological effect of prenatal substance exposure. This study explores the long-term developmental consequences in children from birth to age 7 born to women using substances and are in treatment. A series of t tests were performed to explore group effects on the cognitive and social dimensions of Griffiths Mental Development Scales compared with Swedish norms. The results showed significant effects on eye and hand coordination in children aged birth to 7 years and on hearing and speech, practical reasoning, and the general quotient in children aged 3 to 7 years. Children who were exposed primarily to alcohol in utero scored significantly lower on the personal and social skills subscale, eye and hand coordination subscale, and the general quotient than children exposed primarily to substances other than alcohol. These effects did not appear to be mediated by the mothers' social background or treatment history. The results suggest that children who are exposed to substances, in particular alcohol, in utero are vulnerable overall, but especially in eye and hand coordination and personal and social skills. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Cognitive Development](#)
[*Drug Usage](#)

*Mothers
 *Preschool Students
 *Psychosocial Development
 Childhood Development
 Human Females
 Pregnancy
 Prenatal Exposure

Source: PsycINFO

65. Substance use during pregnancy and postnatal outcomes.

Citation: Journal of Addictive Diseases, January 2012, vol./is. 31/1(19-28), 1055-0887;1545-0848 (Jan 2012)

Author(s): Irner, Tina Birk; Teasdale, Thomas William; Nielsen, Tine; Vedal, Sissel; Olofsson, May

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Institution: Irner, Tina Birk: Family Center, Department of Obstetrics and Gynaecology, Copenhagen University Hospital, Hvidovre, Hvidovre, Denmark

Language: English

Abstract: Substance exposure in utero has been associated with physical birth defects and increased risk of regulatory and neuropsychological difficulties. The aims of this study were to describe women who use substances and are in treatment with respect to the type and number of substances used during pregnancy, as well as their background, and to examine the effect substance use has on gestational age, birth weight, and the development of neonatal abstinence syndrome at birth. A sample of 161 pregnant women and their 163 newborn children were included. The results indicate that the children whose mothers continued to use substances throughout their pregnancies were born at a lower gestational age (Chi-Square = 15.1(2), $P < .01$); children exposed to poly-substances in utero were more affected than those exposed to only alcohol and those with no substance exposure. The same children were more vulnerable to the development of neonatal abstinence syndrome at birth (Chi-Square = 51.7(2), $P < .001$). Newborns who were exposed primarily to alcohol in utero were at a significant risk of being born with low birth weight (Chi-Square = 8.8(2), $P < .05$) compared with those exposed to other types of substances. More than 50% of the mothers ceased using any substances (with the exception of tobacco) by birth, indicating that the treatment program did have an interventional effect on the mothers. The mothers' ability to either cease or decrease the use of substances during pregnancy appears to have direct positive effect on their newborns. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
 *Drug Rehabilitation
 *Intervention
 *Pregnancy
 *Prenatal Exposure
 Birth Weight
 Infant Development
 Mothers
 Neonatal Disorders
 Postnatal Period

Source: PsycINFO

66. The emerging buprenorphine epidemic in the United States.

Citation: Journal of Addictive Diseases, January 2012, vol./is. 31/1(3-7), 1055-0887;1545-0848 (Jan 2012)

Author(s): Wish, Eric D; Artigiani, Erin; Billing, Amy; Hauser, Wanda; Hemberg, Jordana; Shiplet, Myron; DuPont, Robert L

Correspondence Address: Wish, Eric D.: Center for Substance Abuse Research (CESAR), 4321 Hartwick Road, Suite 501, College Park, MD, US, 20740, ewish@umd.edu

Institution: Wish, Eric D.: Center for Substance Abuse Research (CESAR), University of Maryland at College Park, College Park, MD, US

Language: English

Abstract: The authors sampled for expanded drug testing of 1,061 urine specimens collected by Maryland Division of Parole and Probation staff. They found an increase in the percentage of individuals testing positive for buprenorphine and found that these specimens often contained other drugs, suggesting misuse. Subsequent interviews with 15 probationers and parolees in Baltimore, Maryland, showed wide-scale availability of buprenorphine on the street and in prisons. Medical examiners and drug testing programs should immediately initiate routine testing for buprenorphine to track a possible outbreak of buprenorphine diversion and misuse. Physician education programs should redouble their efforts to teach strategies to deter diversion and misuse of the drug. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Epidemics](#)
[*Opiates](#)
[Drug Usage Screening](#)
[Intervention](#)
[Maintenance Therapy](#)
[Public Health](#)

Source: PsycINFO

67. Buprenorphine in the treatment of heroin addiction: Deja vu all over again.

Citation: Journal of Addictive Diseases, January 2012, vol./is. 31/1(1-2), 1055-0887;1545-0848 (Jan 2012)

Author(s): Stimmel, Barry

Language: English

Abstract: Comments on an article by Eric D. Wish et al. (see record 2012-05264-002). The authors have conclusively demonstrated the wide availability of buprenorphine on the streets and in prisons. Urine specimens containing buprenorphine were found to contain cocaine (21%), benzodiazepines (19%), and morphine (45%). The authors note that current testing protocols do not routinely include buprenorphine in the toxicity panel, an exclusion that obscures the magnitude and scope of its use. In prisons, the use of buprenorphine will go undetected because it does not appear in urine toxicology results. The findings suggests that we are at the beginning of an outbreak of buprenorphine misuse that will only increase due to the relative lack of controls placed on its use, combined with the large number of physicians who are permitted to prescribe it in the treatment of opioid addiction. The effectiveness of buprenorphine is not in question. Rather, its use needs to be better controlled and, more importantly, routinely monitored in toxicology panels. During clinical trials, buprenorphine was preferred to heroin. With little monitoring, it became a leading drug of abuse in Australia and New Zealand. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Epidemics](#)
[*Heroin Addiction](#)
[*Opiates](#)
[Drug Usage Screening](#)
[Intervention](#)
[Maintenance Therapy](#)
[Public Health](#)

Source: PsycINFO

68. Component analysis of a school-based substance use prevention program in Spain: Contributions of problem solving and social skills training content.

Citation: Prevention Science, February 2012, vol./is. 13/1(86-95), 1389-4986;1573-6695 (Feb 2012)

Author(s): Espada, Jose P; Griffin, Kenneth W; Pereira, Juan R; Orgiles, Mireia; Garcia-Fernandez, Jose M

Correspondence Address: Espada, Jose P.: Department of Health Psychology, Miguel Hernandez University, Av. de la Universidad, s/n. 03202, Alicante, Elche, Spain, jpespada@umh.es

Institution: Espada, Jose P.: Department of Health Psychology, Miguel Hernandez University, Elche, Spain

Language: English

Abstract: The objective of the present research was to examine the contribution of two intervention components, social skills training and problem solving training, to alcohol- and drug-related outcomes in a school-based substance use prevention program. Participants included 341 Spanish students from age 12 to 15 who received the prevention program Saluda in one of four experimental conditions: full program, social skills condition, problem solving condition, and a wait-list control group. Students completed self-report surveys at the pretest, posttest and 12-month follow-up assessments. Compared to the wait-list control group, the three intervention conditions produced reductions in alcohol use and intentions to use other substances. The intervention effect size for alcohol use was greatest in magnitude for the full program with all components. Problem-solving skills measured at the follow-up were strongest in the condition that received the full program with all components. We discuss the implications of these findings, including the advantages and disadvantages of implementing tailored interventions to students by selecting intervention components after a skills-based needs assessment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for Prevention Research; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse Prevention](#)
[*Problem Solving](#)
[*School Based Intervention](#)
[*Social Skills Training](#)
[Drug Addiction](#)

Source: PsycINFO

69. Evaluating the impact of a substance use intervention program on the peer status and influence of adolescent peer leaders.

Citation: Prevention Science, February 2012, vol./is. 13/1(75-85), 1389-4986;1573-6695 (Feb 2012)

Author(s): Sheppard, Christopher S; Golonka, Megan; Costanzo, Philip R

Correspondence Address: Costanzo, Philip R.: Department of Psychology and Neuroscience, Duke University, Box 90086, Durham, NC, US, 27708, costanzo@duke.edu

Institution: Sheppard, Christopher S.: Department of Psychology and Neuroscience, Duke University, Durham, NC, US

Language: English

Abstract: The current study involved an examination of the impact of a peer-led substance use intervention program on the peer leaders beyond the substance use-related goals of the intervention. Specifically, unintended consequences of an adult-sanctioned intervention on the targeted peer leader change agents were investigated, including whether their participation affected their peer status, social influence, or self perceptions. Twenty-two 7th grade peer-identified intervention leaders were compared to 22 control leaders (who did not experience the intervention) and 146 cohort peers. Three groups of measures were employed: sociometric and behavioral nominations, social cognitive mapping, and leadership self-perceptions. Results indicated that unintended consequences appear to be a legitimate concern for females. Female intervention leaders declined in perceived popularity and liked most nominations over time, whereas males increased in total leader nominations. Explanations for these results are discussed and further directions suggested. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for Prevention Research; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Leadership](#)
[*Peer Relations](#)
[Adolescent Psychology](#)
[Drug Abuse Prevention](#)
[School Based Intervention](#)
[Social Influences](#)
[Status](#)

Source: PsycINFO

70. Marijuana exposure opportunity and initiation during college: Parent and peer influences.

Citation: Prevention Science, February 2012, vol./is. 13/1(43-54), 1389-4986;1573-6695 (Feb 2012)

Author(s): Pinchevsky, Gillian M; Arria, Amelia M; Caldeira, Kimberly M; Garnier-Dykstra, Laura M; Vincent, Kathryn B; O'Grady, Kevin E

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Language: English

Abstract: Marijuana is the most prevalent illicit drug used by adolescents and young adults, yet marijuana initiation is rarely studied past adolescence. The present study sought to advance our understanding of parent and peer influences on marijuana exposure opportunity and incident use during college. A sample of 1,253 students was assessed annually for 4 years starting with the summer prior to college entry. More than one-third (38%wt) of students had already used marijuana at least once prior to college entry; another 25%wt initiated use after starting college. Of the 360 students who did not use marijuana prior to college, 74% were offered marijuana during college; of these individuals, 54% initiated marijuana use. Both low levels of parental monitoring during the last year of high school and a high percentage of marijuana-using peers independently predicted marijuana exposure opportunity during college, holding constant demographics and other factors (AOR = 0.92, 95% CI = 0.88-0.96, $p < .001$ and AOR = 1.11, 95% CI = 1.08-1.14, $p < .001$, respectively). Among individuals with exposure opportunity, peer marijuana use (AOR = 1.04, 95% CI = 1.03-1.05, $p < .001$), but not parental monitoring,

was associated with marijuana initiation. Results underscore that peer influences operate well into late adolescence and young adulthood and thus suggest the need for innovative peer-focused prevention strategies. Parental monitoring during high school appears to influence exposure opportunity in college; thus, parents should be encouraged to sustain rule-setting and communication about adolescent activities and friend selection throughout high school. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for Prevention Research; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Interpersonal Influences](#)
[*Marijuana](#)
[*Parent Child Relations](#)
[*Peer Relations](#)
[Cannabis](#)
[Prevention](#)

Source: PsycINFO

71. Psychoactive substance use and the risk of motor vehicle crash injuries in Southern Taiwan.

Citation: Prevention Science, February 2012, vol./is. 13/1(36-42), 1389-4986;1573-6695 (Feb 2012)

Author(s): Hou, Ching-Cheng; Chen, Shou-Chien; Tan, Lia-Beng; Chu, Wen-Yang; Huang, Chen-Mao; Liu, Shyun-Yeu; Chen, Kow-Tong

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Institution: Hou, Ching-Cheng: Department of Intensive Care Medicine, Chi-Mei Medical Center, Tainan, Taiwan

Language: English

Abstract: The purpose of this study was to examine the association between psychoactive drug use and motor vehicle crash (MVC) injuries requiring hospitalization in southern Taiwan. A case-control study was conducted in southern Taiwan from January 2009 to December 2009. The cases included car or van drivers who were involved in MVCs and required hospitalization. Demographic and trauma-related data were collected from questionnaires and hospital and ambulance records. Urine and/or blood samples were collected on admission. The controls consisted of drivers who were randomly recruited while driving on public roads. Study subjects were interviewed and asked to provide urine samples. All blood and urine samples were tested for alcohol and a number of other legal and illegal drugs. Only those subjects who provided urine and/or blood specimens were included in the study. During the study period, 254 case patients and 254 control drivers were enrolled. The analysis showed an odds ratio (OR) of 3.41 (95% confidence intervals (95% CI), 1.76-6.70; $p < 0.001$) for persons taking benzodiazepines, and an OR of 3.50 (95% CI, 1.81-6.85; $p < 0.001$) for those taking alcohol (blood alcohol concentrations (BAC) ≥ 0.8 g/l) with regard to hospitalizations due to MVCs. For persons taking combinations of benzodiazepines and alcohol, the OR increased to 5.12 (95% CI: 1.77-15.91, $p < 0.001$). This study concluded that drug use among motor vehicle drivers increases the risk of MVCs that require hospitalization. From a public health perspective, the high risk ratios are concerning, and preventive measures are warranted. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for Prevention Research; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Injuries](#)
[*Motor Traffic Accidents](#)
[Hospitalization](#)

Source: PsycINFO

72. Gene coexpression networks in human brain identify epigenetic modifications in alcohol dependence.

Citation: The Journal of Neuroscience, February 2012, vol./is. 32/5(1884-1897), 0270-6474;1529-2401 (Feb 1, 2012)

Author(s): Ponomarev, Igor; Wang, Shi; Zhang, Lingling; Harris, R. Adron; Mayfield, R. Dayne

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Institution: Ponomarev, Igor: Waggoner Center for Alcohol and Addiction Research, University of Texas at Austin, Austin, TX, US

Language: English

Abstract: Alcohol abuse causes widespread changes in gene expression in human brain, some of which contribute to alcohol dependence. Previous microarray studies identified individual genes as candidates for alcohol phenotypes, but efforts to generate an integrated view of molecular and cellular changes underlying alcohol addiction are lacking. Here, we applied a novel systems approach to transcriptome profiling in postmortem human brains and generated a systemic view of brain alterations associated with alcohol abuse. We identified critical cellular components and previously unrecognized epigenetic determinants of gene coexpression relationships and discovered novel markers of chromatin modifications in alcoholic brain. Higher expression levels of endogenous retroviruses and genes with high GC content in alcoholics were associated with DNA hypomethylation and increased histone H3K4 trimethylation, suggesting a critical role of epigenetic mechanisms in alcohol addiction. Analysis of cell-type-specific transcriptomes revealed remarkable consistency between molecular profiles and cellular abnormalities in alcoholic brain. Based on evidence from this study and others, we generated a systems hypothesis for the central role of chromatin modifications in alcohol dependence that integrates epigenetic regulation of gene expression with pathophysiological and neuroadaptive changes in alcoholic brain. Our results offer implications for epigenetic therapeutics in alcohol and drug addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The authors; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Brain](#)
[*Gene Expression](#)
[*Epigenetics](#)

Source: PsycINFO

73. The Canadian Network for Mood and Anxiety Treatments (CANMAT) task force recommendations for the management of patients with mood disorders and comorbid substance use disorders.

Citation: Annals of Clinical Psychiatry, February 2012, vol./is. 24/1(38-55), 1040-1237;1547-3325 (Feb 2012)

Author(s): Beaulieu, Serge; Saury, Sybille; Sareen, Jitender; Tremblay, Jacques; Schutz, Christian G; McIntyre, Roger S; Schaffer, Ayal

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Language: English

Abstract: Background: Mood disorders, especially bipolar disorder (BD), frequently are associated with substance use disorders (SUDs). There are well-designed trials for the treatment of

SUDs in the absence of a comorbid condition. However, one cannot generalize these study results to individuals with comorbid mood disorders, because therapeutic efficacy and/or safety and tolerability profiles may differ with the presence of the comorbid disorder. Therefore, a review of the available evidence is needed to provide guidance to clinicians facing the challenges of treating patients with comorbid mood disorders and SUDs. Methods: We reviewed the literature published between January 1966 and November 2010 by using the following search strategies on PubMed. Search terms were bipolar disorder or depressive disorder, major (to exclude depression, postpartum; dysthymic disorder; cyclothymic disorder; and seasonal affective disorder) cross-referenced with alcohol or drug or substance and abuse or dependence or disorder. When possible, a level of evidence was determined for each treatment using the framework of previous Canadian Network for Mood and Anxiety Treatments recommendations. The lack of evidence-based literature limited the authors' ability to generate treatment recommendations that were strictly evidence based, and as such, recommendations were often based on the authors' opinion. Results: Even though a large number of treatments were investigated for alcohol use disorder (AUD), none have been sufficiently studied to justify the attribution of level 1 evidence in comorbid AUD with major depressive disorder (MDD) or BD. The available data allows us to generate first-choice recommendations for AUD comorbid with MDD and only third-choice recommendations for cocaine, heroin, and opiate SUD comorbid with MDD. No recommendations were possible for cannabis, amphetamines, methamphetamines, or polysubstance SUD comorbid with MDD. First-choice recommendations were possible for alcohol, cannabis, and cocaine SUD comorbid with BD and only second-choice recommendations for heroin, amphetamine, methamphetamine, and polysubstance SUD comorbid with BD. No recommendations were possible for opiate SUD comorbid with BD. Finally, psychotherapies certainly are considered an essential component of the overall treatment of SUDs comorbid with mood disorders. However, further well-designed studies are needed in order to properly assess their potential role in specific SUDs comorbid with a mood disorder. Conclusions: Although certain treatments show promise in the management of mood disorders comorbid with SUDs, additional well-designed studies are needed to properly assess their potential role in specific SUDs comorbid with a mood disorder. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Disease Management](#)
[*Drug Abuse](#)
[*Treatment](#)
[Affective Disorders](#)
[Comorbidity](#)
[Drug Therapy](#)

Source: PsycINFO

74. Use of *Salvia divinorum* in a nationally representative sample.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(108-113), 0095-2990;1097-9891 (Jan 2012)

Author(s): Perron, Brian E; Ahmedani, Brian K; Vaughn, Michael G; Glass, Joseph E; Abdon, Arnelyn; Wu, Li-Tzy

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Institution: Perron, Brian E.: School of Social Work, University of Michigan, Ann Arbor, MI, US

Language: English

Abstract: Background: *Salvia divinorum* has known hallucinogenic effects and is legal in most parts of the United States. Given that this psychoactive substance has a potential of misuse and abuse, further data regarding the clinical and psychosocial factors associated with use are needed. Objectives: To examine the clinical and psychosocial characteristics associated with use of salvia. Methods: The study uses data from the National Survey on Drug Use and Health, 2008 (N = 55,623). Results: The results of this study suggest that salvia use is

most common among young adults aged 18-25 years as well as individuals who had engaged in risk-taking behaviors (selling illicit drugs, stealing) or illicit drug use (especially other hallucinogens/ecstasy). Self-reported depression and anxiety were also associated with salvia use. Conclusions/Scientific Significance: The results provide evidence that salvia use is part of a broader constellation of psychosocial and behavioral problems among youth and young adults. The accessibility, legal status, and psychoactive effects of salvia can be a potentially complicating health risk to young people, especially among those with existing substance use problems. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Hallucinogenic Drugs](#)
[*Psychosocial Factors](#)

Source: PsycINFO

75. Attention-deficit/hyperactivity disorder subtypes in adolescents with comorbid substance-use disorder.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(93-100), 0095-2990;1097-9891 (Jan 2012)

Author(s): Tamm, Leanne; Adinoff, Bryon; Nakonezny, Paul A; Winhusen, Theresa; Riggs, Paula

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Institution: Tamm, Leanne: Department of Pediatrics, Division of Behavioral Medicine and Clinical Psychology, Cincinnati Children's Hospital Medical Center, Cincinnati, OH, US

Language: English

Abstract: Background: Little is known about the relationship between attention-deficit/hyperactivity disorder (ADHD) subtypes and substance-use disorder (SUD). As there is literature suggesting different subtype phenotypes, there may be subtype differences in regard to the risk for developing SUD and substance treatment response. Objectives: To characterize the sample in a Clinical Trials Network (CTN) study according to ADHD subtypes and baseline psychosocial and substance-use characteristics and to compare subtypes on response to treatment. Methods: Secondary analyses on data collected from adolescents (n = 276) diagnosed with ADHD and SUD (non-nicotine) and treated with stimulant medication or placebo and cognitive behavioral therapy (CBT) for substance use. Participants were characterized as inattentive or combined ADHD subtype and compared on baseline characteristics and treatment outcome. Results: The combined subtype presented with more severe SUDs and higher rates of conduct disorder. There were a greater proportion of boys with inattentive subtype. The inattentive subtype appeared less ready for treatment (greater University of Rhode Island Change Assessment precontemplation scores) with poorer coping skills (poorer problem-solving and abstinence focused coping) at baseline. However, the two subtypes responded equally to treatment even after controlling for baseline differences. Conclusions: Findings from this large community sample indicate that there were no subtype differences in treatment response, although there were differences in terms of substance use, antisocial behavior, readiness for treatment, and gender prior to treatment. Scientific Significance: This study is the first to report on subtype differences for treatment response for non-nicotine SUD in a comorbid ADHD-SUD population. Despite some baseline differences, both subtypes responded equally to treatment, suggesting limited relevance for subtype designation on treatment planning. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Attention Deficit Disorder with Hyperactivity](#)

*Drug Abuse
 *Subtypes (Disorders)
 Comorbidity

Source: PsycINFO

76. Compensation effects on clinical trial data collection in opioid-dependent young adults.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(81-86), 0095-2990;1097-9891 (Jan 2012)

Author(s): Wilcox, Claire E; Bogenschutz, Michael P; Nakazawa, Masato; Woody, George E

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Institution: Wilcox, Claire E.: Department of Psychiatry, University of New Mexico, Albuquerque, NM, US

Language: English

Abstract: Background: Attrition in studies of substance use disorder treatment is problematic, potentially introducing bias into data analysis. Objectives: This study aimed to determine the effect of participant compensation amounts on rates of missing data and observed rates of drug use. Methods: We performed a secondary analysis of a clinical trial of buprenorphine/naloxone among 152 treatment-seeking opioid-dependent subjects aged 15-21 during participation in a randomized trial. Subjects were randomized to a 2-week detoxification with buprenorphine/naloxone (DETOX; N = 78) or 12 weeks buprenorphine/naloxone (BUP; N = 74). Participants were compensated \$5 for weekly urine drug screens and self-reported drug use information and \$75 for more extensive assessments at weeks 4, 8, and 12. Results: Though BUP assignment decreased the likelihood of missing data, there were significantly less missing data at 4, 8, and 12 weeks than other weeks, and the effect of compensation on the probability of urine screens being positive was more pronounced in DETOX subjects. Conclusion: These findings suggest that variations in the amount of compensation for completing assessments can differentially affect outcome measurements, depending on treatment group assignment. Scientific Significance: Adequate financial compensation may minimize bias when treatment condition is associated with differential dropout and may be a cost-effective way to reduce attrition. Moreover, active users may be more likely than non-active users to drop out if compensation is inadequate, especially in control groups or in groups who are not receiving active treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Compensation (Defense Mechanism)
 *Data Collection
 *Drug Usage
 Opiates
 Treatment

Source: PsycINFO

77. Association between alcohol screening results and hospitalizations for trauma in veterans affairs outpatients.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(73-80), 0095-2990;1097-9891 (Jan 2012)

Author(s): Williams, Emily C; Bryson, Chris L; Sun, Haili; Chew, Ryan B; Chew, Lisa D; Blough, David K; Au, David H; Bradley, Katharine A

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Institution: Williams, Emily C.: Health Services Research & Development (HSR&D), Northwest Center of Excellence, Veterans Affairs (VA) Puget Sound Health Care System, Seattle, WA, US

Language: English

Abstract: Background: Alcohol consumption is a risk factor for traumatic injury, but it is unknown whether responses to alcohol screening questionnaires administered routinely in primary care are associated with subsequent hospitalization for traumatic injury. Objective: We evaluated the association between alcohol screening scores and the risk for subsequent hospitalizations for trauma among Veterans Affairs (VA) general medicine patients. Method: This study included VA outpatients (n = 32,623) at seven sites who returned mailed surveys (1997-1999). Alcohol Use Disorders Identification Test Consumption (AUDIT-C) scores grouped patients into six drinking categories representing nondrinkers, screen-negative drinkers, and drinkers who screened positive for mild, moderate, severe, and very severe alcohol misuse (scores 0, 1-3, 4-5, 6-7, 8-9, 10-12, respectively). VA administrative and Medicare data identified primary discharge diagnoses for trauma. Cox proportional hazard models were used to estimate the risk of trauma-related hospitalization for each drinking group adjusted for demographics, smoking, and comorbidity. Results: Compared with screen-negative drinkers, patients with severe and very severe alcohol misuse (AUDIT-C 8-9 and ≥ 10) were at significantly increased risk for trauma-related hospitalization over the follow-up period (adjusted hazard ratios AUDIT-C: 8-9 2.06, 95% confidence interval (CI) 1.31- 3.24 and AUDIT-C ≥ 10 2.13, 95% CI 1.32-3.42). Conclusions: Patients with severe and very severe alcohol misuse had a twofold increased risk of hospital admission for trauma compared to drinkers without alcohol misuse. Scientific Significance: Alcohol screening scores could be used to provide feedback to patients regarding risk of trauma-related hospitalization. Findings could be used by providers during brief alcohol-related interventions with patients with alcohol misuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: VA Health Services Research & Development annual meeting. 2005. Washington. DC, US. A preliminary version of this work was presented at the aforementioned conference.

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Hospitalization](#)
[*Military Veterans](#)
[*Risk Factors](#)
[*Trauma Screening](#)

Source: PsycINFO

78. The value of clinical case management in a methadone maintenance treatment program.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(70-72), 0095-2990;1097-9891 (Jan 2012)

Author(s): Plater-Zyberk, Carolyn J; Varenbut, Michael; Daiter, Jeff; Worster, Andrew

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Institution: Plater-Zyberk, Carolyn J.: Ontario Addiction Treatment Centres, Richmond Hill, ON, Canada

Language: English

Abstract: Background/Objective: This study sought to determine whether case management was positively associated with improved outcomes and treatment compliance in those enrolled in a methadone maintenance treatment (MMT) program. Methods: An intervention group (n = 396) received case management while the other group (n = 1308) did not. Total N = 1704. Results: Statistically significant reductions were seen in the intervention group, in

the proportion of urine samples positive for drugs of abuse (relative risk reduction = -15.4% (95% confidence interval (CI): -17.7, -13.1)), missed daily methadone doses (-1.9% (95% CI: -2.4, -1.4)), and missed physician appointments (-40.1% (95% CI: -43.7, -36.3)). Conclusions/Scientific Significance: Case management appears to be a very valuable tool in MMT programs. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Case Management](#)
[*Methadone Maintenance](#)
[*Treatment Compliance](#)
[*Treatment Outcomes](#)
[Drug Abuse](#)
[Intervention](#)

Source: PsycINFO

79. Substance abuse associated with elder abuse in the United States.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(63-69), 0095-2990;1097-9891 (Jan 2012)

Author(s): Jogerst, Gerald J; Daly, Jeanette M; Galloway, Lara J; Zheng, Shimin; Xu, Yinghui

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Institution: Jogerst, Gerald J.: Department of Family Medicine, University of Iowa, Iowa City, IA, US

Language: English

Abstract: Background: Substance abuse by either victim or perpetrator has long been associated with violence and abuse. Sparse research is available regarding elder abuse and its association with substance abuse. Objective: The objective of this study was to evaluate the association of state-reported domestic elder abuse with regional levels of substance abuse. Methods: Census demographic and elder abuse data were sorted into substate regions to align with the substance use treatment-planning regions for 2269 US counties. From the 2269 US counties there were 229 substate regions in which there were 213,444 investigations of abuse. For the other Ns (reports and substantiations) there were fewer counties and regions. See first sentence of data analyses and first sentence of results. Results: Elder abuse report rates ranged from .03 to .41% (80 regions), investigation rates .001 to .34% (229 regions), and substantiation rates 0 to .22% (184 regions). Elder abuse investigations and substantiations were associated with various forms of substance abuse. Higher investigation rates were significantly associated with a higher rate of any illicit drug use in the past month, a lower median household income, lower proportion of the population graduated high school, and higher population of Hispanics. Higher substantiation rates were significantly associated with higher rate of illicit drug use in the past month and higher population of Hispanics. Conclusion: It may be worthwhile for administrators of violence programs to pay particular attention to substance abuse among their clients and in their community's environment, especially if older persons are involved. Scientific Significance: Measures of documented elder abuse at the county level are minimal. To be able to associate substance abuse with elder abuse is a significant finding, realizing that the substance abuse can be by the victim or the perpetrator of elder abuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Elder Abuse](#)
[Domestic Violence](#)

Perpetrators
Victimization

Source: PsycINFO

80. Anthropological perspectives on money management: Considerations for the design and implementation of interventions for substance abuse.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(49-54), 0095-2990;1097-9891 (Jan 2012)

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Institution: Carpenter-Song, Elizabeth: Dartmouth Psychiatric Research Center, Rivermill Commercial Center, Lebanon, NH, US

Language: English

Abstract: Background: There remains a long-standing argument regarding the need for money management strategies to control poor spending habits among people with substance use disorders. Objective: The objective was to review issues relevant to the design and implementation of money-management-based interventions for substance abuse. Methods: Using a comparative, cross-cultural framework of anthropology, this manuscript examines three challenges for the design and implementation of money management interventions for substance abuse: (i) clients may not trust mental health centers to manage their money, (ii) clients may have different economic perspectives from clinicians and researchers, and (iii) clients may obtain substances through informal networks of exchange. Results: This article clarifies the inherently complex symbolic and social dimensions of money and addiction and illustrates the need for researchers and clinicians to be mindful of the cultural assumptions that underlie money management interventions for substance abuse. Conclusions and Scientific Significance: Using an anthropological approach toward understanding the issues surrounding money management for individuals struggling with addiction and mental illness has the potential to strengthen the design and implementation of money-management-based interventions in a manner that is acceptable and meaningful for this target population. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Anthropology
*Drug Abuse
*Intervention
*Money

Source: PsycINFO

81. Paying substance abusers in research studies: Where does the money go?

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(43-48), 0095-2990;1097-9891 (Jan 2012)

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Language: English

Abstract: Background: Research involving substance-abusing participants is often hindered by low rates of recruitment and retention. Research suggests that monetary payment or remuneration can be an effective strategy to overcome these obstacles. Objectives: This article provides a brief overview of these issues and provides data reflecting how substance-abusing participants in several of our studies used their baseline and follow-up payments. We also present research findings related to how the mode of payment (i.e., cash, check, gift card) may affect how payments are used. Conclusions and Significance: Overall, our findings suggest that participants use their research payments in a responsible and safe manner. Limitations and recommendations for future research are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Money](#)
[*Personnel Recruitment](#)
[*Retention](#)

Source: PsycINFO

82. Relations among delay discounting, addictions, and money mismanagement: Implications and future directions.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(30-42), 0095-2990;1097-9891 (Jan 2012)

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Language: English

Abstract: Background: Delay discounting is a reduction in the subjective value of a delayed outcome. Elevated delay discounting is a type of impulsivity that is associated with harmful behaviors, including substance abuse and financial mismanagement. Methods: Elevated delay discounting as related to addiction and financial mismanagement was reviewed from psychological, neurobiological, and behavioral economic perspectives. Results: Addiction and financial mismanagement frequently co-occur, and elevated delay discounting may be a common mechanism contributing to both of these problematic behaviors. Conclusions: Future research on the relationships between delay discounting, substance abuse, and financial mismanagement can provide important insights for developing improved prevention and treatment strategies. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Drug Abuse](#)
[*Impulsiveness](#)
[*Management](#)
[*Money](#)

Source: PsycINFO

83. Monetary-based consequences for drug abstinence: Methods of implementation and some considerations about the allocation of finances in substance abusers.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(20-29), 0095-2990;1097-9891 (Jan 2012)

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Language: English

Abstract: Conceptualizing drug abuse within the framework of behavioral theories of choice highlights the relevance of environmental variables in shifting behavior away from drug-related purchases. Choosing to use drugs results in immediate and certain consequences (e.g., drug high and relief from withdrawal), whereas choosing abstinence typically results in delayed, and often uncertain, consequences (e.g., improved health, interpersonal relationships, money). Methods: This is a selective review of the literature on Contingency management (CM). Results: We highlight a variety of methods to deliver CM in practical, effective, and sustainable ways. We consider a number of parameters that are critical to the success of monetary-based CM, and the role of the context in influencing CM's effects. To illustrate the broad range of applications of CM, we also review different methods for arranging contingencies to promote abstinence and other relevant behavior. Finally, we discuss some considerations about how drug-dependent individuals allocate their finances in the context of CM interventions. Conclusions: Contingency management (CM) increases choice for drug abstinence via the availability of immediate, financial-based gains, contingent on objective evidence of abstinence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Contingency Management](#)
[*Drug Abstinence](#)
[*Drug Abuse](#)
[*Finance](#)
[*Money](#)

Source: PsycINFO

84. Some observations from behavioral economics for consideration in promoting money management among those with substance use disorders.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(8-19), 0095-2990;1097-9891 (Jan 2012)

Author(s): Chivers, Laura L; Higgins, Stephen T

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Language: English

Abstract: Background: Behavioral economics research has revealed systematic biases in decision making that merit consideration in efforts to promote money management skills among those with substance use disorders (SUDs). Objectives: The objective of this article was to briefly review the literature on five of those biases (i.e., hyperbolic delay discounting, defaults and preference for the status quo, loss aversion, mental accounting, and failure to account for opportunity cost) that may have particular relevance to the topic of money management. Methods: Selected studies are reviewed to illustrate these biases and how they may relate to efforts to promote money management skills among those with substance use disorders. Studies were identified by searching PubMed using the terms "behavioral economics" and "substance use disorders", reviewing bibliographies of published articles, and discussions with colleagues. Results: Only one of these biases (i.e., hyperbolic delay discounting) has been investigated extensively among those with SUDs. Indeed, it has been found to be sufficiently prevalent among those with SUDs to be considered as a potential risk factor for those disorders and certainly merits careful consideration in efforts to improve money management skills in that population. There has been relatively little empirical research reported regarding the other biases among

those with SUDs, although they appear to be sufficiently fundamental to human behavior and relevant to the topic of money management (e.g., loss aversion) to also merit consideration. There is precedent of effective leveraging of behavioral economics principles in treatment development for SUDs (e.g., contingency management), including at least one intervention that explicitly focuses on money management (i.e., advisor-teller money management therapy). Conclusions and Scientific Significance: The consideration of the systematic biases in human decision making that have been revealed in behavioral economics research has the potential to enhance efforts to devise effective strategies for improving money management skills among those with SUDs. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Disorders](#)
[*Drug Abuse](#)
[*Management](#)
[*Money](#)
[*Behavioral Economics](#)
[Decision Making](#)

Source: PsycINFO

85. Overview of special sub-section on money management articles: Cross-disciplinary perspectives on money management by addicts.

Citation: The American Journal of Drug and Alcohol Abuse, January 2012, vol./is. 38/1(2-7), 0095-2990;1097-9891 (Jan 2012)

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Institution: Rosen, Marc I.: Department of Psychiatry, Yale University School of Medicine, West Haven, CT, US

Language: English

Abstract: Background: How addicts manage their funds can be understood from the studies of impulsive spending, contingency management, self-reported expenditures, behavioral economics, and anthropology. Objective: To show how these differing perspectives can provide theoretical explanations for substance abuse, they were applied to the question of when extra "windfall" funds are spent on substances of abuse. Treatment implications of these perspectives were examined. Methods: Relevant literature was reviewed. Results: Behavioral economics and related approaches provide the basis for money-management-based interventions targeting substance abuse, informed configuration of reinforcers to compete with substances, and therapeutically framing the choice between abstinence and substance use. Conclusions and Scientific Significance: A cross-discipline consideration of how addicts manage their funds has the potential to inform and improve substance abuse treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Anthropology](#)
[*Contingency Management](#)
[*Drug Addiction](#)
[*Money](#)
[*Behavioral Economics](#)

Source: PsycINFO

86. Amygdala response to smoking-cessation messages mediates the effects of serotonin transporter gene variation on quitting.

Citation: NeuroImage, March 2012, vol./is. 60/1(766-773), 1053-8119 (Mar 2012)

Author(s): Jasinska, Agnes J; Chua, Hannah Faye; Ho, S. Shaun; Polk, Thad A; Rozek, Laura S; Strecher, Victor J

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Institution: Jasinska, Agnes J.: Neuroscience Program, University of Michigan, Ann Arbor, MI, US

Language: English

Abstract: The amygdala is critically involved in detecting emotionally salient stimuli and in enhancing memory for emotional information. Growing evidence also suggests that the amygdala plays a crucial role in addiction, perhaps by strengthening associations between emotionally-charged drug cues and drug-seeking behavior. In the current study, by integrating functional MRI (fMRI), genetics, and outcome data from a large group of smokers who completed a smoking-cessation intervention and attempted to quit, we show that the amygdala also plays a role in quitting. Specifically, we demonstrate that the amygdala response to smoking-cessation messages in smokers trying to quit is a predictor of their post-intervention quitting outcome. We further show that the amygdala response is modulated by genetic variation in the serotonin transporter and mediates the impact of this genetic variation on quitting. These results point to a gene-brain-behavior pathway relevant to smoking cessation, and add to our understanding of the role of the amygdala in nicotine addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Amygdala](#)
[*Serotonin](#)
[*Smoking Cessation](#)
[*Functional Magnetic Resonance Imaging Genes](#)

Source: PsycINFO

87. Neural substrates of smoking cue reactivity: A meta-analysis of fMRI studies.

Citation: NeuroImage, March 2012, vol./is. 60/1(252-262), 1053-8119 (Mar 2012)

Author(s): Engelmann, Jeffrey M; Versace, Francesco; Robinson, Jason D; Minnix, Jennifer A; Lam, Cho Y; Cui, Yong; Brown, Victoria L; Cinciripini, Paul M

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Institution: Engelmann, Jeffrey M.: Department of Behavioral Science, University of Texas MD Anderson Cancer Center, Houston, TX, US

Language: English

Abstract: Reactivity to smoking-related cues may be an important factor that precipitates relapse in smokers who are trying to quit. The neurobiology of smoking cue reactivity has been investigated in several fMRI studies. We combined the results of these studies using activation likelihood estimation, a meta-analytic technique for fMRI data. Results of the meta-analysis indicated that smoking cues reliably evoke larger fMRI responses than neutral cues in the extended visual system, precuneus, posterior cingulate gyrus, anterior cingulate gyrus, dorsal and medial prefrontal cortex, insula, and dorsal striatum. Subtraction meta-analyses revealed that parts of the extended visual system and dorsal prefrontal cortex are more reliably responsive to smoking cues in deprived smokers than in non-deprived smokers, and that short-duration cues presented in eventrelated designs

produce larger responses in the extended visual system than long-duration cues presented in blocked designs. The areas that were found to be responsive to smoking cues agree with theories of the neurobiology of cue reactivity, with two exceptions. First, there was a reliable cue reactivity effect in the precuneus, which is not typically considered a brain region important to addiction. Second, we found no significant effect in the nucleus accumbens, an area that plays a critical role in addiction, but this effect may have been due to technical difficulties associated with measuring fMRI data in that region. The results of this meta-analysis suggest that the extended visual system should receive more attention in future studies of smoking cue reactivity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Prefrontal Cortex](#)
[*Tobacco Smoking](#)
[*Functional Magnetic Resonance Imaging](#)
[*Insula](#)
[*Set Shifting](#)

Source: PsycINFO

88. Erratum to: "Transition to drug addiction: A negative reinforcement model based on an allostatic decrease in reward function."

Citation: Psychopharmacology, March 2012, vol./is. 220/1(247), 0033-3158;1432-2072 (Mar 2012)

Author(s): Ahmed, Serge H; Koob, George F

Institution: Ahmed, Serge H.: Committee on the Neurobiology of Addictive Disorder, Scripps Research Institute, La Jolla, CA, US

Language: English

Abstract: Reports an error in "Transition to drug addiction: A negative reinforcement model based on an allostatic decrease in reward function" by Serge H. Ahmed and George F. Koob (Psychopharmacology, 2005[Jul], Vol 180[3], 473-490). In the original article, the apparent volume of distribution used in the simulations was 0.6 units and not 1.8 units as incorrectly written in the legend of figure 2. There were also errors in eqs. 6, 7, 8, 9 and 11. The corrections are present in the erratum. None of these corrections change our initial conclusions. (The following abstract of the original article appeared in record 2005-06720-011). Rationale: The transition from initial drug use to drug addiction has been proposed to result from an allostatic decrease in reward function driven by an overactivation of brain antireward processes. Objectives: How decreased reward function explains compulsive drug use is not entirely clear at present, and is still a subject for debate. Methods: We present a quantitative model of cocaine self-administration that integrates pharmacokinetic, pharmacodynamic, and motivational factors to address this question. The model assumes that reward system responsivity is a homeostatically regulated process where the desired level of responsivity (called the reward set point) is initially different from the baseline level. The reduction or correction of this difference or error in reward function would drive cocaine self-administration. Results: Theoretical data obtained by computer simulation fit the experimental data obtained in animals self-administering cocaine (i.e., the within-session pattern of self-injections, the shape and curvature of the dose-injection function, the nonlinear relationship between drug intake and regulated drug effects). Importantly, simulation of an allostatic decrease in reward system responsivity exacerbates the initial error that drives self-administration, thereby increasing both the intake of, and the motivation for, the drug. This allostatic change manifests as a vertical shift in the dose-injection function similar to that seen in animals with escalating cocaine self-administration. Conclusions: The present model provides a satisfactory explanation of escalated drug intake and suggests a novel negative reinforcement view of addiction based on an allostatic decrease in reward function. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Animal Models](#)
[*Drug Addiction](#)
[*Drug Self Administration](#)
[*Negative Reinforcement](#)
[Rewards](#)

Source: PsycINFO

89. Dose escalation and dose preference in extended-access heroin self-administration in Lewis and Fischer rats.

Citation: Psychopharmacology, March 2012, vol./is. 220/1(163-172), 0033-3158;1432-2072 (Mar 2012)

Author(s): Picetti, Roberto; Caccavo, Jilda A; Ho, Ann; Kreek, Mary Jeanne

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Institution: Picetti, Roberto: Rockefeller University, Laboratory of the Biology of Addictive Diseases, New York, NY, US

Language: English

Abstract: Rationale: A genetic component may be involved in different stages of the progression of drug addiction. Heroin users escalate unit doses and frequency of self-administration events over time. Rats that self-administer drugs of abuse over extended sessions escalate the amount of drug infused over days. Objectives: Using a recently developed model of extended-access self-administration allowing for subject-controlled dose escalation of the unit dose, thus potentially escalating the unit dose and number of infusions, we compared for the first time two genetically different inbred rat strains, Fischer and Lewis. Methods: Extended (18 h/day) self-administration lasted for 14 days. Rats had access to two active levers associated with two different unit doses of heroin. If a rat showed preference for the higher unit dose, then the available doses were escalated in the following session. Four heroin unit doses were available (20, 50, 125, 250 μ g/kg per infusion). Results: Fischer rats did not escalate the unit dose of heroin self-administered; daily amount of heroin administered remained low, with a mean daily intake of 1.27 \pm 0.22 mg/kg per session. In marked contrast, Lewis rats escalated the total daily amount of heroin self-administered from 3.94 \pm 0.82 mg/kg on day 1 to 8.95 \pm 2.2 mg/kg on day 14; almost half of the subjects preferred a higher heroin dose than Fischer rats. Conclusion: These data are consistent with the hypothesis that Lewis rats are prone to opiate taking and escalation, and are in agreement with our previous data obtained with cocaine. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Animal Strain Differences](#)
[*Drug Dosages](#)
[*Drug Self Administration](#)
[*Heroin](#)
[*Preferences](#)
[Drug Addiction](#)
[Rats](#)

Source: PsycINFO

90. Pregabalin reduces alcohol drinking and relapse to alcohol seeking in the rat.

Citation: Psychopharmacology, March 2012, vol./is. 220/1(87-96), 0033-3158;1432-2072 (Mar 2012)

Author(s): Stopponi, Serena; Somaini, Lorenzo; Cippitelli, Andrea; de Guglielmo, Giordano; Kallupi, Marsida; Cannella, Nazzareno; Gerra, Gilberto; Massi, Maurizio; Ciccocioppo, Roberto

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Institution: Stopponi, Serena: School of Pharmacy, Pharmacology Unit, University of Camerino, Camerino, Italy

Language: English

Abstract: Rationale: Pregabalin (Lyrica™) is a structural analogue of gamma -aminobutyric acid (GABA) approved by FDA for partial epilepsy, neuropathic pain and recently generalized anxiety disorder. While the exact cellular mechanism of action of pregabalin is still unclear, evidence from several studies suggests that it reduces excitatory neurotransmitter release and postsynaptic excitability. Objectives: Based on these mechanisms we sought interesting to evaluate the effect of pregabalin on alcohol-abuse-related behaviours. Materials and methods: For this purpose, using genetically selected alcohol-preferring Marchigian Sardinian (msP) rats, we evaluated the effect of pregabalin on alcohol drinking and relapse to alcohol seeking elicited by environmental conditioning factors or stress. Results: Our results showed that treatment with pregabalin (0, 10, 30 and 60 mg/kg) given orally selectively reduced home cage alcohol drinking in msP rat. This effect was confirmed in self-administration experiments where pregabalin (0, 10 and 30 mg/kg) significantly reduced operant responding for alcohol but not for food. Using alcohol reinstatement models we also found that pregabalin (0, 10 and 30 mg/kg) abolished seeking behaviour elicited by the pharmacological stressor yohimbine as well as cues predictive of alcohol availability. Conclusions: Results demonstrate that pregabalin may have potential in the treatment of alcohol addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohols](#)
[*Animal Drinking Behavior](#)
[*Relapse \(Disorders\)](#)
[*Drug Seeking](#)
[*Pregabalin](#)
[Rats](#)

Source: PsycINFO

91. Regulation of cocaine-induced reinstatement by group II metabotropic glutamate receptors in the ventral tegmental area.

Citation: Psychopharmacology, March 2012, vol./is. 220/1(75-85), 0033-3158;1432-2072 (Mar 2012)

Author(s): Lu, LianYi; Xue, YueQiang; Steketee, Jeffery D; Rebec, George V; Sun, WenLin

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Institution: Lu, LianYi: Department of Pharmacology, University of Tennessee Health Science Center, Memphis, TN, US

Language: English

Abstract: Rationale: A high rate of relapse is a daunting challenge facing clinical treatment of cocaine addiction. Recent studies have shown that drugs of abuse enhance glutamate neurotransmission in dopamine neurons in the ventral tegmental area (VTA) and such enhancement may contribute to the risk of relapse. Objectives: Given the important role of group II metabotropic glutamate receptors (mGluR2/3s) in regulating glutamate release from the glutamatergic terminals, this study aimed to test whether activation of mGluR2/3s in the VTA can inhibit cocaine-induced reinstatement of cocaine-seeking behavior, a model of relapse to drug-seeking behavior. Methods: Rats were trained to self-administer intravenous cocaine (0.25 mg/infusion) under a modified fixed-ratio 5 schedule. After rats reached the training criteria, they went through extinction training to extinguish cocaine-seeking behavior. Then the dose-response effects of a selective

mGluR2/3 agonist LY 379268 microinjected into the VTA on cocaine-induced reinstatement of cocaine-seeking behavior were assessed. Results: LY 379268 (0.032-0.1 μ g/side) dose-dependently decreased cocaine-induced reinstatement. The effect could not be fully attributed to diffusion of the drug to the neighboring substantia nigra or to motor impairment. Interestingly, LY 379268 has a less potent effect on cocaine-induced reinstatement than on sucrose-induced reinstatement of sucrose-seeking behavior. Conclusions: Our data support the idea that glutamate release in the VTA is critically involved in cocaine-induced reinstatement and indicate that loss of mGluR2/3-mediated regulation of glutamate release in the VTA may critically contribute to the risk of relapse. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Glutamate Receptors](#)
[*Tegmentum](#)
[*Reinstatement](#)
[Animal Models](#)
[Drug Abuse](#)
[Drug Dependency](#)
[Rats](#)
[Relapse \(Disorders\)](#)

Source: PsycINFO

92. Alpha7-nicotinic receptors modulate nicotine-induced reinforcement and extracellular dopamine outflow in the mesolimbic system in mice.

Citation: Psychopharmacology, March 2012, vol./is. 220/1(1-14), 0033-3158;1432-2072 (Mar 2012)

Author(s): Besson, Morgane; David, Vincent; Baudonnat, Mathieu; Cazala, Pierre; Guilloux, Jean-Philippe; Reperant, Christelle; Cloez-Tayarani, Isabelle; Changeux, Jean-Pierre; Gardier, Alain M; Granon, Sylvie

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Language: English

Abstract: Rationale: Nicotine is the main addictive component of tobacco and modifies brain function via its action on neuronal acetylcholine nicotinic receptors (nAChRs). The mesolimbic dopamine (DA) system, where neurons of the ventral tegmental area (VTA) project to the nucleus accumbens (ACb), is considered a core site for the processing of nicotine's reinforcing properties. However, the precise subtypes of nAChRs that mediate the rewarding properties of nicotine and that contribute to the development of addiction remain to be identified. Objectives: We investigated the role of the nAChRs containing the alpha 7 nicotinic subunit (alpha 7*nAChRs) in the reinforcing properties of nicotine within the VTA and in the nicotine-induced changes in ACb DA outflow in vivo. Methods: We performed intra-VTA self-administration and microdialysis experiments in genetically modified mice lacking the alpha 7 nicotinic subunit or after pharmacological blockade of alpha 7*nAChRs in wild-type mice. Results: We show that the reinforcing properties of nicotine within the VTA are lower in the absence or after pharmacological blockade of alpha 7*nAChRs. We also report that nicotine-induced increases in ACb DA extracellular levels last longer in the absence of these receptors, suggesting that alpha 7*nAChRs regulate the action of nicotine on DA levels over time. Conclusions: The present results reveal new insights for the role of alpha 7*nAChRs in modulating the action of nicotine within the mesolimbic circuit. These receptors appear to potentiate the reinforcing action of nicotine administered into the VTA while regulating its action over

time on DA outflow in the ACb. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cholinergic Receptors](#)
[*Dopamine](#)
[*Nicotine](#)
[*Reinforcement](#)
[Limbic System](#)
[Mice](#)

Source: PsycINFO

93. Latent growth curve modeling and the study of problem behavior in girls.

Citation: Antisocial behavior and crime: Contributions of developmental and evaluation research to prevention and intervention., 2012(315-332) (2012)

Author(s): Stemmler, Mark; Petersen, Anne C

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Institution: Stemmler, Mark: Friedrich-Alexander-University Erlangen-Nuremberg, Department of Psychology and Sport Science, Institute of Psychology, Erlangen, Germany

Language: English

Abstract: (from the chapter) Using the data of the Adolescent Mental Health Study (AMHS; Petersen, 1984) covering a 10-year time span between the first and last data assessment, the relationship between girls' psychological adjustment measured repeatedly during the adolescent years and problem behavior in young adulthood was investigated. The problem behavior consisted of drug use (i.e., legal and illegal drug use) and norm violating acts (e.g., "Vandalized properly not belonging to you," "Taken something not belonging to you worth under \$50"). The longitudinal sample consisted of n = 133 girls. Latent Growth Curve Modeling (LGCM; McArdle, 2009) based on structural equation modeling (SEM) was used to investigate intra- and interindividual change. The general pattern of developmental increases in psychological adjustment was significantly reduced by the young women's drug use and their norm violating behavior. It was significantly lowered through drug use. Drug use itself was positively related to norm violating behavior. In addition, the advantage of using LGCM is presented and discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Adolescent Development](#)
[*Behavior Problems](#)
[*Data Collection](#)
[*Emotional Adjustment](#)
[*Structural Equation Modeling](#)
[Drug Usage](#)
[Experimentation](#)
[Human Females](#)
[Social Norms](#)

Source: PsycINFO

94. Developmental sequences and pathways towards serious delinquency and substance use.

Citation: Antisocial behavior and crime: Contributions of developmental and evaluation research to prevention and intervention., 2012(39-52) (2012)

Author(s): Loeber, Rolf; White, Helene Raskin; Burke, Jeffrey D

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Institution: Loeber, Rolf: University of Pittsburgh, Western Psychiatric Institute and Clinic, Department of Psychiatry, Pittsburgh, PA, US

Language: English

Abstract: (from the chapter) The study of developmental sequences, also called pathways, among problem behaviors is a key step to identify targets for early interventions and is necessary to improve etiological models of problem behavior. Developmental pathways refer to the development of different problem behaviors at a level that is better than chance. This chapter concerns developmental pathways from minor externalizing behaviors to serious property crime, violence and homicide, and developmental pathways between substance use and delinquency. The paper closes with a discussion of the limitations of past studies and the prospects of future studies on developmental pathways. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Criminal Behavior](#)
[*Drug Abuse](#)
[*Etiology](#)
[*Human Development](#)
[*Juvenile Delinquency](#)
[Behavior Problems](#)
[Crime](#)
[Experimentation](#)
[Homicide](#)
[Violence](#)

Source: PsycINFO

95. Sexual compulsivity, co-occurring psychosocial health problems, and HIV risk among gay and bisexual men: Further evidence of a syndemic.

Citation: American Journal of Public Health, January 2012, vol./is. 102/1(156-162), 0090-0036;1541-0048 (Jan 2012)

Author(s): Parsons, Jeffrey T; Grov, Christian; Golub, Sarit A

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Institution: Parsons, Jeffrey T.: Hunter College Center for HIV/ AIDS Educational Studies and Training (CHEST), City University of New York (CUNY), New York, NY, US

Language: English

Abstract: Objectives. We evaluated whether sexual compulsivity fits into a syndemic framework, in which sexual compulsivity is one of a number of co-occurring psychosocial health problems that increase HIV risk among men who have sex with men (MSM). Methods. In 2003 and 2004, we conducted an anonymous cross-sectional survey of MSM in New York City (n = 669) by approaching attendees at gay, lesbian, and bisexual community events. We analyzed data by bivariate and multivariate logistic regression. Results. We found strong positive interrelationships among syndemic factors including sexual compulsivity, depression, childhood sexual abuse, intimate partner violence, and polydrug use. In bivariate analyses, all syndemic health problems except for childhood sexual abuse were positively related to HIV seropositivity and high-risk sexual behavior. Our multivariate models revealed an array of interrelationships among psychosocial health problems. We found amplified effects of these problems on HIV seropositivity and on the likelihood of engaging in high-risk sexual behavior. Conclusions. Our findings support the conclusion that sexual compulsivity is a component of a syndemic framework for HIV risk among MSM. HIV prevention interventions should consider the overlapping and

compounding effects of psychosocial problems, including sexual compulsivity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: Meeting of the International Academy of Sex Research. 2009. An earlier version of this article was presented at the aforementioned conference.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Bisexuality](#)
[*Male Homosexuality](#)
[*Sexual Addiction](#)
[*Sexual Risk Taking](#)
[*Same Sex Intercourse](#)
[HIV](#)
[Risk Factors](#)

Source: PsycINFO

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

96. Acceptability of a clinician-assisted computerized psychological intervention for comorbid mental health and substance use problems: Treatment adherence data from a randomized controlled trial.

Citation: Journal of Medical Internet Research, January 2011, vol./is. 13/1(339-349), 1438-8871 (Jan-Mar 2011)

Author(s): Kay-Lambkin¹, Frances; Baker, Amanda; Lewin, Terry; Carr, Vaughan

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Institution: Kay-Lambkin¹, Frances: National Drug and Alcohol Research Centre, University of New South Wales, Randwick, NSW, Australia

Language: English

Abstract: Background: Computer-delivered psychological treatments have great potential, particularly for individuals who cannot access traditional approaches. Little is known about the acceptability of computer-delivered treatment, especially among those with comorbid mental health and substance use problems. Objective: The objective of our study was to assess the acceptability of a clinician-assisted computer-based (CAC) psychological treatment (delivered on DVD in a clinic-setting) for comorbid depression and alcohol or cannabis use problems relative to a therapist-delivered equivalent and a brief intervention control. Methods: We compared treatment acceptability, in terms of treatment dropout/participation and therapeutic alliance, of therapist-delivered versus CAC psychological treatment. We randomly assigned 97 participants with current depression and problematic alcohol/cannabis use to three conditions: brief intervention (BI, one individual session delivered face to face), therapist-delivered (one initial face-to-face session plus 9 individual sessions delivered by a therapist), and CAC interventions (one initial face-to-face session plus 9 individual CAC sessions). Randomization occurred following baseline and provision of the initial session, and therapeutic alliance ratings were obtained from participants following completion of the initial session, and at sessions 5 and 10 among the therapist-delivered and CAC conditions. Results: Treatment retention and attendance rates were equal between therapist-delivered and CAC conditions, with 51% (34/67) completing all 10 treatment sessions. No significant differences existed between participants in therapist-delivered and CAC conditions at any point in therapy on the majority of therapeutic alliance subscales. However, relative to therapist-delivered treatment, the subscale of Client Initiative was rated significantly higher among participants allocated to the BI ($F_{2,54} = 4.86, P = .01$) and CAC participants after session 5 ($F_{1,29} = 9.24, P = .005$), and this domain was related to better alcohol outcomes. Linear regression modeled therapeutic alliance over all sessions, with treatment allocation, retention, other demographic factors, and baseline symptoms exhibiting no predictive value. Conclusions: Participants in a trial

of CAC versus therapist-delivered treatment were equally able to engage, bond, and commit to treatment, despite comorbidity typically being associated with increased treatment dropout, problematic engagement, and complexities in treatment planning. The extent to which a client feels that they are directing therapy (Client initiative) may be an important component of change in BI and CAC intervention, especially for hazardous alcohol use. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Frances Kay-Lambkin, Amanda Baker, Terry Lewin, Vaughan Carr

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[*Intervention](#)
[*Treatment Compliance](#)
[*Computer Assisted Therapy](#)
[Clinical Trials](#)
[Clinicians](#)
[Mental Health](#)

Source: PsycINFO

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

97. A theory-based video messaging mobile phone intervention for smoking cessation: Randomized control trial.

Citation: Journal of Medical Internet Research, January 2011, vol./is. 13/1(61-72), 1438-8871 (Jan-Mar 2011)

Author(s): Whittaker, Robyn; Dorey, Enid; Bramley, Dale; Bullen, Chris; Denny, Simon; Elley, C. Raina; Maddison, Ralph; McRobbie, Hayden; Parag, Varsha; Rodgers, Anthony; Salmon, Penny

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Institution: Whittaker, Robyn: Clinical Trials Research Unit, University of Auckland, Auckland, New Zealand

Language: English

Abstract: Background: Advances in technology allowed the development of a novel smoking cessation program delivered by video messages sent to mobile phones. This social cognitive theory-based intervention (called "STUB IT") used observational learning via short video diary messages from role models going through the quitting process to teach behavioral change techniques. Objective: The objective of our study was to assess the effectiveness of a multimedia mobile phone intervention for smoking cessation. Methods: A randomized controlled trial was conducted with 6-month follow-up. Participants had to be 16 years of age or over, be current daily smokers, be ready to quit, and have a video message-capable phone. Recruitment targeted younger adults predominantly through radio and online advertising. Registration and data collection were completed online, prompted by text messages. The intervention group received an automated package of video and text messages over 6 months that was tailored to self-selected quit date, role model, and timing of messages. Extra messages were available on demand to beat cravings and address lapses. The control group also set a quit date and received a general health video message sent to their phone every 2 weeks. Results: The target sample size was not achieved due to difficulty recruiting young adult quitters. Of the 226 randomized participants, 47% (107/226) were female and 24% (54/226) were Maori (indigenous population of New Zealand). Their mean age was 27 years (SD 8.7), and there was a high level of nicotine addiction. Continuous abstinence at 6 months was 26.4% (29/110) in the intervention group and 27.6% (32/116) in the control group ($P = .8$). Feedback from participants indicated that the support provided by the video role models was important and appreciated. Conclusions: This study was not able to demonstrate a statistically significant effect of the complex video messaging mobile phone intervention compared with simple general health video messages via mobile phone. However, there was

sufficient positive feedback about the ease of use of this novel intervention, and the support obtained by observing the role model video messages, to warrant further investigation. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Robyn Whittaker, Enid Dorey, Dale Bramley, Chris Bullen, Simon Denny, C Raina Elley, Ralph Maddison, Hayden McRobbie, Varsha Parag, Anthony Rodgers, Penny Salmon

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Rehabilitation](#)
[*Intervention](#)
[*Smoking Cessation](#)
[*Tobacco Smoking](#)
[*Cellular Phones](#)
[Clinical Trials](#)
[Digital Video](#)
[Messages](#)
[Theories](#)

Source: PsycINFO

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

98. Descriptive profiles and correlates of substance use in Hong Kong adolescents: A longitudinal study.

Citation: International Journal of Child Health and Human Development, October 2011, vol./is. 4/4(443-460), 1939-5965 (Oct-Dec 2011)

Author(s): Shek, Daniel T. L.; Yu, Lu

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Institution: Shek, Daniel T. L.: Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong, China

Language: English

Abstract: Utilizing longitudinal data collected from secondary school students in Hong Kong (N = 7,975 at Wave 1 and N = 6,962 at Wave 6), the present study examined the prevalence of different substance use behaviors among Hong Kong adolescents and identified several psychosocial correlates of adolescent drug abuse. Results showed that drug use was not uncommon amongst adolescents in Hong Kong, with alcohol, tobacco, and organic solvent being the most frequently used substance. Being male and non-intact family status were risk factors for adolescent substance use. Consistent with our expectation, good academic and school performance as well as positive youth development constructs generally decreased the likelihood of using drugs. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Nova Science Publishers, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Drug Abuse](#)
[*Psychosocial Factors](#)
[Epidemiology](#)
[Risk Factors](#)

Source: PsycINFO

99. Substance abuse in junior secondary school students in Hong Kong: Prevalence and psychosocial correlates.

Citation: International Journal of Child Health and Human Development, October 2011, vol./is. 4/4(433-442), 1939-5965 (Oct-Dec 2011)

Author(s): Shek, Daniel T. L.; Ma, Cecilia M. S

Correspondence Address: Shek, Daniel T. L.: Faculty of Health and Social Sciences, Department of Applied Social Sciences, Hong Kong Polytechnic University, Room HJ407, Core H, Hungghom, Hong Kong, daniel.shek@polyu.edu.hk

Institution: Shek, Daniel T. L.: Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong, China

Language: English

Abstract: Smoking, drinking and abuse of illicit drug behavior were examined in 3,328 Secondary 1 students in Hong Kong. Results showed that 5.8% and 28% of the respondents indicated that they had smoked and consumed alcohol in the past year, respectively. Some students had consumed organic solvent (2.1%), cough mixture (0.5%) and ketamine (0.4%) in the past year. Results showed that different measures of positive youth development and family functioning were related to adolescent substance abuse behavior. Generally speaking, higher levels of positive youth development and favorable family functioning were related to lower levels of substance abuse. The contribution of positive youth development and family factors to adolescent substance abuse is discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Nova Science Publishers, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Psychosocial Factors](#)
[*Tobacco Smoking](#)
[*Underage Drinking](#)
[Adolescent Development](#)
[Adolescent Psychology](#)
[Chinese Cultural Groups](#)
[Family](#)
[Junior High School Students](#)

Source: PsycINFO

100. Envelopments: Immersion in and emergence from drug misuse.

Citation: American Journal of Psychotherapy, 2011, vol./is. 65/2(163-177), 0002-9564 (2011)

Author(s): Weegmann, Martin; Khantzian, Edward J

Correspondence Address: Weegmann, Martin: Addiction Treatment Centre, Queen Mary's Hospital, Roehampton Lane, London, England, SW15 5PN, weegmans@aol.com

Institution: Weegmann, Martin: South West London Mental Health NHS Trust, London, United Kingdom

Language: English

Abstract: Contemporary psychodynamic therapists, as contrasted with early ones, are more active and interactive, less dependent on interpretations, and more focused on affects, self-regulation, and interpersonal relations, with a premium placed on the therapeutic alliance. Evidence supports the utility and effectiveness of the psychodynamic paradigm. Two cases are presented that demonstrate how a well-trained psychodynamic therapist is able to effectively apply such an approach to individuals with substance use disorders, in one instance a client in early treatment still immersed in her addictions, and, in the second case a client in early abstinence emerging from a long standing dependency on alcohol and cocaine. The case material highlights the special sensitivities and practices required to address predisposing factors and resulting consequences associated with addictive disorders. Reflections by the therapist and the clients provide a basis to consider the nature of the clients' addictive involvements, a rationale for the therapist's interventions, and how client vulnerabilities are addressed in their attempts to recover from their addictions. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Psychodynamic Psychotherapy](#)
[Drug Abuse](#)
[Drug Rehabilitation](#)
Source: PsycINFO
Full Text: Available in *fulltext* at [ProQuest](#)

101. "Looking at breakout: Urgency and predictability direct eye events": Corrigendum.

Citation: Vision Research, December 2011, vol./is. 51/23-24(2528), 0042-6989 (Dec 8, 2011)
Author(s): Shalom, Diego E; Dagnino, Bruno; Sigman, Mariano
Institution: Shalom, Diego E.: Laboratory of Integrative Neuroscience, Physics Department, University of Buenos Aires, Buenos Aires, Argentina
Language: English
Abstract: Reports an error in "Looking at breakout: Urgency and predictability direct eye events" by Diego E. Shalom, Bruno Dagnino and Mariano Sigman (Vision Research, 2011[Jun][1], Vol 51[11], 1262-1272). In the original article, on Page 1263, there were errors in the paragraph of the introduction. The correct paragraph is present in this erratum. (The following abstract of the original article appeared in record 2011-09777-009). We investigated the organization of eye-movement classes in a natural and dynamical setup. To mimic the goals and objectives of the natural world in a controlled environment, we studied eye-movements while participants played Breakout, an old Atari game which remains surprisingly entertaining, often addictive, in spite of its graphic and structural simplicity. Our results show that eye-movement dynamics can be explained in terms of simple principles of moments of prediction and urgency of action. We observed a consistent anticipatory behavior (gaze was directed ahead of ball trajectory) except during the moment in which the ball bounced either in the walls, or in the paddle. At these moments, we observed a refractory period during which there are no blinks and saccades. Saccade delay caused the gaze to fall behind the ball. This pattern is consistent with a model by which participants postpone saccades at the bounces while predicting the ball trajectory and subsequently make a catch-up saccade directed to a position which anticipates ball trajectory. During bounces, trajectories were smooth and curved interpolating the V-shape function of the ball with minimal acceleration. These results pave the path to understand the taxonomy of eye-movements on natural configurations in which stimuli and goals switch dynamically in time. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Eye Movements](#)
[*Visual Perception](#)
[Experiences \(Events\)](#)
[Predictability \(Measurement\)](#)
Source: PsycINFO

102. Kleptomania and potential exacerbating factors: A review and case report.

Citation: Innovations in Clinical Neuroscience, October 2011, vol./is. 8/10(35-39), 2158-8333;2158-8341 (Oct 2011)
Author(s): Talih, Farid Ramzi
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Institution: Talih, Farid Ramzi: Ashtabula County Medical Center, Diplomat of the American Board of Psychiatry and Neurology in Psychiatry, Ashtabula, OH, US
Language: English
Abstract: Kleptomania is an impulse control disorder that can cause significant impairment and serious consequences. Often, the condition is kept secret by the patient, and usually help

is sought only when confronted by the legal consequences of the impulsive behaviors. Historically, kleptomania has been viewed from a psychodynamic perspective, and the mainstay of treatment has been psychotherapy. Recently, attempts to explain kleptomania within a neuropsychiatric paradigm have highlighted the possible links between mood disorders, addictive behaviors, and brain injury with kleptomania. These associations with kleptomania can be extrapolated to pharmacological strategies that can potentially help in treating kleptomania. A case of kleptomania, which was potentially exacerbated by multiple factors, will be reviewed. Treatment modalities used in this case, including the use of the Yale-Brown Obsessive Compulsive Scale as a surrogate marker to gauge response to treatment, will be discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Therapy](#)
[*Impulse Control Disorders](#)
[*Kleptomania](#)
[Neuropsychiatry](#)
Source: PsycINFO
Full Text: Available in *fulltext* at [National Library of Medicine](#)

103. Polytobacco use in non-daily smokers: An issue requiring greater attention.

Citation: Preventive Medicine: An International Journal Devoted to Practice and Theory, October 2011, vol./is. 53/4-5(353-354), 0091-7435 (Oct-Nov 2011)
Author(s): McGrath, Daniel S; Temporale, Kirsten L; Bozec, Lyndsay J; Barrett, Sean P
Correspondence Address: Barrett, Sean P.: Dalhousie University, Department of Psychology, 1355 Oxford Street, Halifax, NS, Canada, B3H 4J1, Sean.Barrett@dal.ca
Institution: McGrath, Daniel S.: Department of Psychology, Dalhousie University, Halifax, NS, Canada
Language: English
Abstract: Presents a study which aims to examine polytobacco use (PTU) in a population of non-daily smokers. The results suggest that lifetime PTU was very common with only 3% of the sample having restricted their total tobacco use to one form of administration. PTU was highly prevalent among these non-daily tobacco users. The participants reported high rates of current use for a number of alternative tobacco products. These results suggest that rates of current cigar use, for instance, may be higher among non-daily smokers. than among daily smokers. Because PTU appears to be common among non-daily tobacco users it is important that investigators and practitioners systematically query about various forms of tobacco when examining this population rather than exclusively focusing on a single form of tobacco use such as cigarette smoking. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2011
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Usage](#)
[*Nicotine](#)
[*Tobacco Smoking](#)
Source: PsycINFO

104. Are the national guidelines for health behaviour appropriate for older Australians? Evidence from the Men,Women and Ageing project.

Citation: Australasian Journal on Ageing, October 2011, vol./is. 30/Suppl 2(13-16), 1440-6381;1741-6612 (Oct 2011)
Author(s): McLaughlin, Deirdre; Adams, Jon; Almeida, Osvaldo P; Brown, Wendy; Byles, Julie; Dobson, Annette; Flicker, Leon; Hankey, Graeme J; Jamrozik, Konrad; McCaul, Kieran A; Norman, Paul E; Pachana, Nancy A

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Institution: McLaughlin, Deirdre: University of Queensland, School of Population Health, Brisbane, QLD, Australia

Language: English

Abstract: Aim: To review findings from the Men, Women and Ageing (MWA) longitudinal studies and consider their implications for national health guidelines. Methods: Guidelines for good health for older adults in the areas of body mass index (BMI), physical activity, alcohol consumption and smoking behaviours are compared with MWA findings. Results: Findings from MWA suggest that current BMI guidelines may be too narrow because BMI in the overweight range appears to be protective for both older men and women. Across all levels of BMI, even low levels of physical activity decrease mortality risk compared with being sedentary. Our findings suggest that consideration should be given to having different alcohol guidelines for older men and women and should include recommendations for alcohol-free days. The benefit of quitting smoking at any age is apparent for both women and men. Conclusions: Current national guidelines in the areas discussed in this paper should be reviewed for older people. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author. Australasian Journal on Ageing--ACOTA; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Aging](#)
[*Body Mass Index](#)
[*Drug Usage](#)
[*Health Behavior](#)
[*Physical Activity](#)
[Alcohol Drinking Patterns](#)
[Tobacco Smoking](#)

Source: PsycINFO

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

105. Are national guidelines for health behaviour appropriate for older Australians?

Citation: Australasian Journal on Ageing, October 2011, vol./is. 30/Suppl 2(4-5), 1440-6381;1741-6612 (Oct 2011)

Author(s): Jagger, Carol; Robinson, Louise

Institution: Jagger, Carol: Institute for Ageing and Health, Newcastle University, Newcastle upon Tyne, United Kingdom

Language: English

Abstract: Comments on an article by Deirdre McLaughlin et al. (see record 2011-25252-004). The authors uses findings from two large Australian longitudinal studies of ageing (the Australian Longitudinal Study on Women's Health and the Health in Men Study) which both involve large cohorts of over 12 000 participants, to address whether guidelines in body mass index (BMI), physical activity and alcohol and tobacco consumption should be modified for older adults. Unsurprisingly, the studies confirm the benefits of quitting smoking at any age for both men and women. However, the data on BMI and mortality may begin to generate an interesting debate. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: The Author. Australasian Journal on Ageing--ACOTA; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Aging](#)
[*Body Mass Index](#)
[*Drug Usage](#)
[*Health Behavior](#)

[*Physical Activity](#)
[Alcohol Drinking Patterns](#)
[Tobacco Smoking](#)

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

106. Mindfulness based interventions for addictive disorders: A review.

Original Title: Interventions basees sur la pleine conscience en addictologie.

Citation: L'Encephale: Revue de psychiatrie clinique biologique et therapeutique, October 2011, vol./is. 37/5(379-387), 0013-7006 (Oct 2011)

Author(s): Skanavi, S; Laqueille, X; Aubin, H.-J

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Institution: Skanavi, S.: CHS de Navarre, Evreux, France

Language: French

Abstract: Introduction: In substance use disorders, the lack of empirically supported treatments and the minimal utilization of available programs indicate that innovative approaches are needed. Mindfulness based therapies have been used in addictive disorders for the last 10 years. Mindfulness can be defined as the ability to focus open, non-judgmental attention to the full experience of internal and external phenomena, moment by moment. Several therapies based on mindfulness have been developed. The aim of this study is to review the existing data on the use of these programs in addictive disorders. Methods: We have reviewed the literature published from January 1980 to January 2009, using the following keywords: mindfulness, mindfulness based stress reduction program, dialectical behavior therapy, acceptance and commitment therapy, mindfulness based cognitive therapy, addiction, substance use, alcohol and smoking. Results: Results of six clinical trials evaluating four different programs were found. Five studies were controlled and four were randomized. Drop-out rates were relatively high (from 28 to 55%). In five cases out of six, the program significantly reduced substance use. In four comparative trials out of five, interventions based on mindfulness proved more effective than control conditions. The effectiveness of interventions based on mindfulness and the differential improvement across conditions became greater and was maintained during follow-up when it was long enough. Participants in mindfulness programs were less likely to endorse the importance of reducing emotions associated with smoking and reported significant decreases in avoidance of thoughts which partially mediated alcohol use reduction. Psychiatric symptoms and the level of perceived stress were also significantly reduced. Discussion: Mindfulness may help substance abusers to accept unusual physical sensations that might be confused with withdrawal symptoms, decentre from a strong urge and not act impulsively. It may reduce an individual's susceptibility to act in response to a drug cue. Practice of mindfulness may develop the ability to maintain perspective in response to strong emotional states and mood fluctuations and increase the saliency of natural reinforcers. Mindfulness based programs require an intensive participation, and should therefore be proposed to highly motivated patients. In smoking cessation, they should be used in patients who were unable to quit with less intensive interventions. Some programs are specifically designed for patients with co-occurring psychiatric disorders. Conclusion: The first clinical studies testing mindfulness based interventions in substance use disorders have shown promising results. They must be confirmed by larger controlled randomized clinical trials. By developing a better acceptance of unusual physical sensations, thoughts about drugs and distressing emotions, mindfulness may help in reducing the risk of relapse. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cognitive Therapy](#)
[*Drug Addiction](#)

*Intervention
 *Mindfulness
 *Acceptance and Commitment Therapy

Source: PsycINFO

107. Effectiveness of physical exercise in psychiatry: A therapeutic approach?

Original Title: Efficacite de l'exercice physique en psychiatrie: Une voie therapeutique?

Citation: L'Encephale: Revue de psychiatrie clinique biologique et therapeutique, October 2011, vol./is. 37/5(345-352), 0013-7006 (Oct 2011)

Author(s): Tordeurs, D; Janne, P; Appart, A; Zdanowicz, N; Reynaert, C

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Institution: Tordeurs, D.: Cliniques Universitaires UCL Mont-Godinne, Yvoir, Belgium

Language: French

Abstract: Introduction: There is a general belief that physical activity and exercise have positive effects on mood and anxiety. Intervention studies describe an anxiolytic and antidepressive effect of exercise in healthy subjects and patients. However, the majority of published studies have substantial methodological inconsistencies. Our review of the literature showed the importance of distinguishing three items in studies regarding efficacy of physical exercise in psychiatry: operationalisation of concepts (duration, frequency, intensity, type of exercise), the type of disorder, the diagnosis, and exploratory hypotheses. The aim of this article is to demonstrate that physical exercise in the psychiatry department contributes to the improvement of the mental health of in-hospital patients. Methods: Sociodemographical data, the diagnosis and the physical exercise (duration, distance, type and frequency) of 283 in-hospital patients in the psychiatry department were listed. Physical exercise (cycling, long walks, short walks, soft and hard gymnastics) included in a database has been proposed to patients for many years in this hospital. After their hospitalisation, the members of the medical staff (20 persons) evaluated the patients on a visual analogic scale from 1 to 10 related to the improvement of their mental health. No experimental manipulation was made. Subjects: One hundred and twenty-eight men, mean age: 45.67years (+or-13.59) exhibited the following disorders: major depressive disorder (117), anxious disorders (25), alcoholic addiction (85), toxicomania (10), psychotic decompensation (33), bipolar disorder (3) and others (10). Patients practised at least one exercise during their hospitalisation, mean duration of 15.93 (+or-9.18) working days. The frequency of physical exercises per patient was 5.65 (+or-6.20). The improvement of each patient was evaluated around six times (6.16+or-3.83). The average amelioration score for all the patients was close to 50% (4.99+or-1.65). Results: Correlations between the improvement of mental health and participation in physical exercises were all significant (frequency: $r=0.228$; $P<0.001$; duration: $r=0.236$; $P<0.001$; distance: $r=0.201$, $P=0.001$). In comparison with psychotic patients, drug addiction and alcoholic, depressive patients showed greater interest in physical exercise. This is similar for anxious disorders. According to the results, two groups were created regarding their improvement (cut out point: 5.08). We observed that patients suffering from major depression considerably improved thanks to physical exercise ($P=0.048$), spent more time practising ($P=0.037$) and walked or cycled greater distances ($P=0.038$). Finally, cycling (frequency: $P=0.008$; distance: $P=0.016$; duration: $P=0.011$) and "hard" gymnastics were the physical exercises which optimized the results. Discussion: Physical exercise is correlated with the improvement of mental health. The practice of physical exercise depends on the mental disorder. People suffering from major depressive disorder benefit more from physical exercise than other groups. Cycling and "hard" gymnastics are both exercises to be proposed in every programme. Conclusion: To practice physical exercise during hospitalisation in a psychiatric department has a positive influence on the symptomatology, and contributes to the improvement of mental health. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: L'Encephale, Paris; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Anxiety](#)
[*Emotional States](#)
[*Exercise](#)
[*Physical Activity](#)
[*Psychiatry](#)
[Mental Health](#)

Source: PsycINFO

108. Exercise Dependence Questionnaire: A French validation.

Original Title: Validation française du questionnaire de dépendance de l'exercice physique (Exercise Dependence Questionnaire).

Citation: European Review of Applied Psychology/Revue Européenne de Psychologie Appliquée, October 2011, vol./is. 61/4(205-211), 1162-9088 (Oct 2011)

Author(s): Kern, L; Baudin, N

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Institution: Kern, L.: Laboratoire EA 2931, Centre de Recherches Sur le Sport et le Mouvement (CERSM), UFR-STAPS, Nanterre, France

Language: French

Abstract: Introduction: The Exercise Dependence Questionnaire (EDQ) conceptualises exercise dependence (ED) within both traditional biomedical and psychosocial perspectives. This tool is a valid and reliable multidimensional measure of ED. Objective: The aim of the present study was to examine the internal consistency, test-retest reliability and factorial validity of the EDQ, in a French language version. In comparison to other existing scales like the EDS (Exercise Dependence Scale), the EDQ emphasises not only the symptoms of addiction but also the motivations to exercise. Method: The French language version of the EDQ was completed by 160 participants (60% male, students and practitioners leavers of sports activities). Participants completed the EDS and measures of exercise behavior. Results: Adequate internal consistency and test-retest reliability for the scale were obtained. Confirmatory analysis (SPSS 16) supported a correlated eight-factor model, as suggested by Ogden, Veale and Summers (1997). The model fit indices were satisfying, RMSEA = 0.048; CFI = 0.90; IFI = 0.91; Chi-square/dll = 1.38. This study provides evidence for the reliability and validity of the French language version of the EDQ. The convergent validity of this scale with the Exercise Dependence Scale was $r = 0.52$. These two scales appear more complementary than redundant. The EDS focuses more on the strict definition of the dependence whereas the EDQ adds a motivational perspective often link to eating disorders. Conclusion: The EDQ can be thus used in the clinical and studies framework on the exercise dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Masson SAS; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Exercise](#)
[*Health Behavior](#)
[*Psychometrics](#)
[*Psychosocial Factors](#)
[*Test Validity](#)

Source: PsycINFO

109. The use of mixed methods research in the field of behavioural sciences.

Citation: Quality & Quantity: International Journal of Methodology, October 2011, vol./is. 45/6(1459-1472), 0033-5177;1573-7845 (Oct 2011)

Author(s): Lopez-Fernandez, Olatz; Molina-Azorin, Jose F

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Institution: Lopez-Fernandez, Olatz: Dept. Metodologia de les Ciències del Comportament, Facultat de Psicologia, Universitat de Barcelona, Barcelona, Spain

Language: English

Abstract: Mixed methods research involves the combined use of quantitative and qualitative methods in the same research study, and it is becoming increasingly important in several scientific areas. The aim of this paper is to review and compare through a mixed methods multiple-case study the application of this methodology in three reputable behavioural science journals: the Journal of Organizational Behavior, Addictive Behaviors and Psicothema. A quantitative analysis was carried out to review all the papers published in these journals during the period 2003-2008 and classify them into two blocks: theoretical and empirical, with the latter being further subdivided into three subtypes (quantitative, qualitative and mixed). A qualitative analysis determined the main characteristics of the mixed methods studies identified, in order to describe in more detail the ways in which the two methods are combined based on their purpose, priority, implementation and research design. From the journals selected, a total of 1,958 articles were analysed, the majority of which corresponded to empirical studies, with only a small number referring to research that used mixed methods. Nonetheless, mixed methods research does appear in all the behavioural science journals studied within the period selected, showing a range of designs, where the sequential equal weight mixed methods research design seems to stand out. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media B.V.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Behavioral Sciences](#)
[*Empirical Methods](#)
[*Qualitative Research](#)
[*Quantitative Methods](#)

Source: PsycINFO

110. Substance use disorders and borderline personality: Common bedfellows.

Citation: Innovations in Clinical Neuroscience, September 2011, vol./is. 8/9(10-13), 2158-8333;2158-8341 (Sep 2011)

Author(s): Sansone, Randy A; Sansone, Lori A

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Institution: Sansone, Randy A.: Departments of Psychiatry and Internal Medicine, Wright State University School of Medicine, Dayton, OH, US

Language: English

Abstract: According to the empirical literature, substance use disorders are commonly comorbid with a number of psychiatric disorders, including the personality disorders and especially borderline personality disorder. With regard to borderline personality disorder, eight studies of varying sample types (e.g., inpatient, outpatient, community) indicate prevalence rates of substance use disorders from 14 percent (current rate) to 72 percent (lifetime rate). As expected, lifetime prevalence rates of substance use disorders in borderline personality disorder exceed current and 12-month rates. In addition, in clinical samples, men with borderline personality disorder outnumber women with borderline personality disorder with regard to the presence of comorbid substance use disorders. According to the meager available literature, there is also a relationship between prescription substance abuse and borderline personality disorder. However, this relationship deviates from traditional findings with general substance abuse in that rates for women with borderline personality disorder equal rates for men with borderline

personality disorder. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Borderline Personality Disorder](#)
[*Comorbidity](#)
[*Drug Abuse](#)
Source: PsycINFO
Full Text: Available in *fulltext* at [National Library of Medicine](#)

111. Drug benefit changes under Medicare Advantage Part D: Heterogeneous effects on pharmaceutical use and expenditures.

Citation: Journal of General Internal Medicine, October 2011, vol./is. 26/10(1195-1200), 0884-8734;1525-1497 (Oct 2011)

Author(s): Ettner, Susan L; Steers, W. Neil; Turk, Norman; Quiter, Elaine S; Mangione, Carol M

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Institution: Ettner, Susan L.: Division of General Internal Medicine, Department of Medicine, David Geffen School of Medicine, UCLA, Los Angeles, CA, US

Language: English

Abstract: BACKGROUND: Although Medicare Part D improved drug benefits for many beneficiaries, its impact on the coverage of Medicare Advantage Part D (MAPD) enrollees depended on their pre-existing benefits and whether they had gap coverage under Part D. OBJECTIVE: To examine changes in prescription drug utilization and expenditures associated with drug benefit changes resulting from the implementation of Part D. PATIENTS: We studied 248,773 continuously enrolled MAPD patients in eight states. Patients whose insurance product or Census block could not be identified or who had atypical benefits, low-income subsidies or Medicaid coverage were excluded. MAIN MEASURES: The main outcomes were changes in prescription drug days supply and expenditures from 2005 to 2006 and 2005 to 2007. DESIGN: We linked Census data with 2005-7 MAPD claims, encounter, enrollment, and benefits data and estimated associations of the outcomes with changes in drug benefits, controlling for 2005 comorbidities, demographics, and Census population characteristics. KEY RESULTS: MAPD enrollees whose drug benefits became potentially less generous after Part D had the smallest increases in drug utilization and expenditures (e.g., drug expenditures increased by \$130 between 2005 and 2006), while those who potentially gained the most from Part D experienced the largest increases (\$302). The differences in benefit design changes had a stronger association with drug utilization and outcomes among patients at high risk of gap entry than among the entire sample. CONCLUSIONS: Although Medicare Part D unambiguously improved drug coverage for many elderly, it led to heterogeneous changes in drug benefits among MAPD enrollees, who already had generic and sometimes branded drug benefits. After 2006, benefits were worse for individuals who had branded drug coverage in 2005 but now had a coverage gap, but benefits may have improved for individuals who acquired branded drug coverage. Commensurate with these differential changes in benefits following Part D, changes in drug utilization and expenditures varied substantially as well. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society of General Internal Medicine; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Medicare](#)
[*Prescription Drugs](#)

Source: PsycINFO

112. Behavior analysis and treatment of drug addiction.

| | |
|--------------------------|---|
| Citation: | Handbook of applied behavior analysis., 2011(451-471) (2011) |
| Author(s): | Silverman, Kenneth; Kaminski, Barbara J; Higgins, Stephen T; Brady, Joseph V |
| Institution: | Silverman, Kenneth: Center for Learning and Health, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD, US |
| Language: | English |
| Abstract: | (from the chapter) Drug addiction is among the most serious and costly health problems in the United States. The National Institutes of Health estimated that drug addiction, including illicit drugs, alcohol and tobacco, is associated with annual costs of \$500 billion. This cost exceeds the estimated cost of other major U.S. health problems, including heart disease (\$183 billion), mental illness (\$161 billion), Alzheimer's disease (\$100 billion), obesity (\$99 billion), diabetes (\$98 billion), and cancer (\$96 billion). Available substance abuse treatments are not effective in all patients, and many individuals with substance use problems remain out of treatment. Extensive evidence from the laboratory and the clinic suggests that drug addiction can be viewed as operant behavior and effectively treated through the application of principles of operant conditioning. This chapter provides an overview of operant laboratory models of drug addiction and research on the treatment of drug addiction through the direct application of operant conditioning. (PsycINFO Database Record (c) 2012 APA, all rights reserved) |
| Publication Type: | Book; Edited Book |
| Subject Headings: | *Behavior Analysis *Drug Addiction *Operant Conditioning *Treatment Behavior Modification Drugs Health Mental Disorders |
| Source: | PsycINFO |

113. Handbook of applied behavior analysis.

| | |
|---------------------|--|
| Citation: | Handbook of applied behavior analysis., 2011 (2011) |
| Author(s): | Fisher, Wayne W [Ed]; Piazza, Cathleen C [Ed]; Roane, Henry S [Ed] |
| Institution: | Fisher, Wayne W.: Center for Autism Spectrum Disorders, Munroe-Meyer Institute, University of Nebraska Medical Center, Omaha, NE, US |
| Language: | English |
| Abstract: | (from the jacket) Describing the state of the science of applied behavior analysis (ABA), this comprehensive handbook provides detailed information about theory, research, and intervention. The contributors are leading authorities who present current best practices and demonstrate effective applications in a wide range of settings, reflecting the growing breadth of the field today. Covering everything from the basic tenets of ABA to general and specialized clinical techniques, the volume is a complete reference and training tool for ABA practitioners and students. The Handbook of Applied Behavior Analysis summarizes the history of ABA and explains its conceptual and empirical building blocks. Approaches to defining and measuring behavior are discussed, including ways to optimize single-case experimental designs. Tools for behavioral assessment are thoroughly reviewed. Contributors then showcase evidence-based strategies for supporting positive behaviors and reducing problem behaviors. Procedures are presented for implementing differential reinforcement; building complex repertoires and establishing stimulus control; teaching verbal behavior; developing antecedent interventions; designing function-based extinction, reinforcement, and punishment interventions; and developing token economies. Throughout, concrete examples of different types of interventions bring the concepts and procedures to life. A section on |

specific applications examines how ABA is being used successfully in education, autism treatment, addiction treatment, gerontology, and other areas. Crucial professional and ethical issues are also addressed. Timely and authoritative, this important handbook belongs on the desks of all behavior analysts and trainees working with children and adults, including special educators, school and clinical psychologists, autism specialists, and behavioral medicine professionals. It is an invaluable resource for graduate-level courses and ABA certification programs. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Behavior Analysis](#)
[*Behavioral Assessment](#)
[*Intervention](#)
[*Best Practices](#)
[*Behavioral Medicine](#)
[Evidence Based Practice](#)
[Experimental Design](#)
[Psychotherapeutic Techniques](#)
Source: PsycINFO

114. Is it time to reformulate racemic methadone?

Citation: Journal of Addiction Medicine, September 2011, vol./is. 5/3(229-231), 1932-0620;1935-3227 (Sep 2011)
Author(s): Karch, Steven B
Institution: Karch, Steven B.: Cardiac Pathology and Cardiovascular Toxicology, Private Consultant, Berkeley, CA, US
Language: English
Abstract: Methadone for opioid dependence is one of the most research-proven medications in all of medicine, and is commonly used for chronic pain treatment. For the vast majority of addiction and pain patients, it provides far greater benefit than risk. However, there has been increasing concern for cardiac toxicity. Trends in methadone-related deaths are disturbing. The most recent report from the US Center for Disease Control covers the period 1999 to 2006. During that interval, the number of fatal poisonings involving opioid analgesics more than tripled from 4000 to 13,800 deaths. Although the prevalence of cardiac toxicity from methadone is unknown and likely uncommon, knowing which patients are at risk would be helpful. More research is needed to determine if cardiac mechanisms are at play in methadone-associated deaths, and whether the differential effect of L-methadone on hERG activity is relevant. If the latter is determined to be true, and given the unique benefits of methadone for pain control and addiction treatment, reformulation of methadone into a D-enantiomer should be considered. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Country of Publication: HOLDER: American Society of Addiction Medicine; YEAR: 2011
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Death and Dying](#)
[*Methadone](#)
[*Side Effects \(Drug\)](#)
[*Toxic Disorders](#)
[Chronic Pain](#)
[Drug Therapy](#)
[Heart Disorders](#)
[Opiates](#)
Source: PsycINFO

115. Self-reported alcohol and drug use in pregnant young women: A pilot study of associated factors and identification.

Citation: Journal of Addiction Medicine, September 2011, vol./is. 5/3(221-226), 1932-0620;1935-3227 (Sep 2011)

Author(s): Chang, Grace; Orav, E. John; Jones, Jennifer A; Buynitsky, Tatyana; Gonzalez, Stephanie; Wilkins-Haug, Louise

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Institution: Chang, Grace: Department of Psychiatry, Brigham and Women's Hospital, Boston, MA, US

Language: English

Abstract: Objectives: This study describes the factors associated with self-reported substance use in pregnant young women attending a hospital clinic and evaluates 3 ways in its identification. Methods: A cross-sectional study of 30 pregnant young adults who responded to a mail survey containing the CRAFFT screening tool. All completed a diagnostic interview that included self-report information on their use of alcohol and drugs before and during pregnancy, the T-ACE screening tool, and the contexts in which they would be likely to use. Medical records were reviewed. Results: One-third of participants consumed alcohol, marijuana, or both while pregnant. Many had lifetime diagnoses of alcohol (23%) or cannabis (30%) use disorders, but only 1 met criteria for current diagnosis. Age, race, education, and children at home were not associated with either prenatal alcohol or cannabis use. Before pregnancy, alcohol drinking was associated with prenatal alcohol use ($P = .02$) and prenatal cannabis use ($P = .06$). Another trend of the before-pregnancy cannabis use being associated with prenatal cannabis use ($P = .08$) was observed. Most participants indicated little likelihood of substance use in convivial, intimate, or negative coping contexts while pregnant. However, participants with prenatal substance use had significantly higher convivial ($P = .02$) and intimate ($P = .01$) subscale scores of the Drinking Context Scale before pregnancy. Compared to the medical record and the T-ACE, the CRAFFT was best in identifying prenatal substance use (c-statistic = 0.9). Conclusions: The CRAFFT screening instrument and asking about the contexts during which alcohol might have been consumed before pregnancy are promising approaches in the identification of prenatal substance use. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Society of Addiction Medicine; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Human Females](#)
[*Pregnancy](#)
[*Risk Factors](#)

Source: PsycINFO

116. Impaired decision making in opiate addiction correlates with anxiety and self-directedness but not substance use parameters.

Citation: Journal of Addiction Medicine, September 2011, vol./is. 5/3(203-213), 1932-0620;1935-3227 (Sep 2011)

Author(s): Lemenager, Tagrid; Richter, Anne; Reinhard, Iris; Gelbke, Jan; Beckmann, Bettina; Heinrich, Milena; Kniest, Anja; Mann, Karl; Hermann, Derik

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Institution: Lemenager, Tagrid: Department of Addictive Behavior and Addiction Medicine, Central Institute of Mental Health, Mannheim, Germany

Language: English

Abstract: Background: Despite a large number of empirical reports of impaired decision making in substance use disorders, the underlying factors contributing to such deficits remain to be elucidated. This study examined the potential influences of personality traits, affective symptoms, and pharmacological variables on decision making, as measured by the Iowa Gambling Task (IGT) in a sample of opioid-dependent patients. Methods: A total of 46 opioid-dependent patients taking part in an opiate maintenance outpatient program and 46 healthy control subjects performed the IGT. Personality traits and affective symptoms were examined by using Zuckerman Sensation-Seeking Scale, the State-Trait Anxiety Inventory and Beck Depression Inventory. In addition, Cloninger Temperament and Character Inventory was administered in the patient group. Information on current and life-time substance use was acquired with a standardized interview. Results: Opioid-dependent patients performed significantly worse on the IGT than controls. This difference disappeared after statistically controlling for trait anxiety, state anxiety, disinhibition, depressive symptoms, and lifetime alcohol consumption. Trait and state anxiety and self-directedness were significantly associated with the IGT final score. Hierarchical regression analyses suggested that self-directedness differentially moderated the relationships between the anxiety variables and IGT performance. Conclusions: The decision-making impairments observed in opioid-dependent patients are influenced by current levels of anxiety and the personality markers trait anxiety and self-directedness. Differences in decision making between opioid-dependent and healthy individuals may also be due to differences in other personality facets, affective symptoms, and alcohol consumption. Amount of opioid and other substance intake did not show any effects. These results indicate that psychological characteristics may have a higher impact on decision-making performance than drug-induced pharmacological effects. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Society of Addiction Medicine; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Decision Making](#)
[*Drug Dependency](#)
[*Emotions](#)
[*Opiates](#)
[*Personality Traits](#)
[Anxiety](#)
[Drug Abuse](#)
[Drug Therapy](#)

Source: PsycINFO

117. Open-label pilot study of extended-release naltrexone to reduce drinking and driving among repeat offenders.

Citation: Journal of Addiction Medicine, September 2011, vol./is. 5/3(163-169), 1932-0620;1935-3227 (Sep 2011)

Author(s): Lapham, Sandra C; McMillan, Garnett P

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Institution: Lapham, Sandra C.: Behavioral Health Research Center of the Southwest, Pacific Institute for Research and Evaluation, Albuquerque, NM, US

Language: English

Abstract: Objectives: A high proportion of persons convicted of driving while impaired repeat the offense. Many continue drinking and driving, even when faced with long jail terms. Hence, they pose a serious public health threat. This preliminary study evaluated extended-release, injectable naltrexone suspension (XR-NTX) and supportive therapy in reducing (1) drinking and (2) attempts to drive after drinking among repeat driving while impaired offenders with an ignition interlock device installed in their vehicles. Methods: Treatment-seeking volunteers received medical management therapy and 3 monthly injections of XR-NTX. We compared data on alcohol consumption, alcohol biomarkers, and interlock information before, during, and after treatment using summary measures

and Sign tests. Results: Of 12 consented subjects, 10 received at least 1 injection, and 7 received all 3 injections. All subjects receiving medication reported a decrease in average drinks per day ($P < 0.01$) and abstinent days ($P = 0.02$) while on treatment versus pretreatment levels. Average daily drinks decreased by 77%, from 3.0 to 0.69 ($P < 0.01$), during treatment with XR-NTX. Average drinks per drinking day also declined by 39% during treatment, from 6.6 to 4.0 ($P = 0.04$). Percent days abstinent increased by 31%, from 56.8 to 81.96 ($P = 0.02$), which persisted after treatment completion. Biomarkers were consistent with reduced drinking. The percentage of vehicular failures to start due to elevated breath alcohol decreased from 3.1% of tests to 1.29% of tests. Conclusions: A randomized, controlled clinical trial is needed to demonstrate the efficacy of this promising treatment regimen for repeat offenders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Society of Addiction Medicine; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Rehabilitation](#)
[*Driving Under the Influence](#)
[*Naltrexone](#)
[Alcohol Intoxication](#)
[Alcoholism](#)
[Drug Therapy](#)
[Public Health](#)

Source: PsycINFO

118. Patient relapse in the context of drug abuse treatment.

Citation: Journal of Addiction Medicine, September 2011, vol./is. 5/3(157-162), 1932-0620;1935-3227 (Sep 2011)

Author(s): Condon, Timothy P; Jacobs, Petra; Tai, Betty; Pintello, Denise; Miner, Lucinda; Elcano, Jennifer C

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Institution: Condon, Timothy P.: National Institute on Drug Abuse, National Institutes of Health, Bethesda, MD, US

Language: English

Abstract: How do addiction treatment programs integrate the expectation of relapse into drug abuse treatment? This article serves as a thought piece to pose questions rather than definitive solutions. It reflects a distillation of discussions that occurred at the National Institute on Drug Abuse meeting titled "Program Response to Patient Relapse," held on July 15, 2009, along with quantitative and qualitative information about the patterns and types of discharge policies, which factors influence them, and how the culture of drug abuse treatment and the personnel interact with this issue. Some existing data on the discharging of relapsed patients are identified. A program's response to relapse is usually guided by its setting (level of care), philosophy (abstinence vs risk behavior reduction), and associated patient behavior ("benign" vs program disruptive). Key questions examined in this context include the following: Can different discharge policies impact a patient's access to treatment, and what are the implications of incorporating a medical model of addiction into discharge policies? (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Society of Addiction Medicine; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Rehabilitation](#)
[*Relapse \(Disorders\)](#)
[Drug Therapy](#)
[Risk Assessment](#)

Source: PsycINFO