

# Search Results

## Table of Contents

---

Search History .....	page 5
1. Predictive validity of the START for unauthorised leave and substance abuse in a secure mental health setting: A pseudo-prospective cohort study. ....	page 6
2. The globalization of addiction research: capacity-building mechanisms and selected examples. ....	page 6
3. Regional alcohol consumption and alcohol-related mortality in Great Britain: novel insights using retail sales data. ....	page 7
4. Healthcare seeking and hospital admissions by people who inject drugs in response to symptoms of injection site infections or injuries in three urban areas of England. ....	page 7
5. Pre(natal) crime: pregnant women, substance abuse and the law. ....	page 8
6. Plain cigarette packs do not exert Pavlovian to instrumental transfer of control over tobacco-seeking. ....	page 8
7. An aid to drug dosing safety in obese children: development of a new nomogram and comparison with existing methods for estimation of ideal body weight and lean body mass. ....	page 9
8. Missing data in substance abuse research? Researchers' reporting practices of sexual orientation and gender identity. ....	page 10
9. Levamisole enhances the rewarding and locomotor-activating effects of cocaine in rats. ....	page 10
10. Adolescent male hazardous drinking and participation in organised activities: involvement in team sports is associated with less hazardous drinking in young offenders. ....	page 10
11. Does depression and substance abuse co-morbidity affect socioeconomic status? Evidence from a prospective study of urban African Americans. ....	page 11
12. Understanding increases in smoking prevalence: case study from France in comparison with England 2000-10. ....	page 12
13. Adolescents' exposure to tobacco and alcohol content in YouTube music videos. ....	page 12
14. The interacting effect of depressive symptoms, gender, and distress tolerance on substance use problems among residential treatment-seeking substance users. ....	page 13
15. Considerations on the role of buprenorphine in recovery from heroin addiction from a UK perspective. ....	page 13
16. Using behavioral economics to predict opioid use during prescription opioid dependence treatment. ....	page 14
17. Exposure to point-of-sale displays and changes in susceptibility to smoking: findings from a cohort study of school students. ....	page 14
18. Replicating cluster subtypes for the prevention of adolescent smoking and alcohol use. ....	page 14
19. Adolescent cannabis and tobacco use and educational outcomes at age 16: birth cohort study. ....	page 15
20. Evaluation of the effectiveness of early or delayed treatment upon healing of mandibular fractures: A retrospective study. ....	page 16
21. Drug use, health and social outcomes of hard-to-treat heroin addicts receiving supervised injectable opiate treatment: secondary outcomes from the Randomized Injectable Opioid Treatment Trial (RIOTT). ....	page 16
22. Risk factors for alcoholism in the Oklahoma Family Health Patterns project: Impact of early life adversity and family history on affect regulation and personality. ....	page 17
23. A population-based Swedish Twin and Sibling Study of cannabis, stimulant and sedative abuse in men. ....	page 17
24. Independent effects of HIV infection and cocaine dependence on neurocognitive impairment in a community sample living in the southern United States. ....	page 17
25. Decreased serotonin <sub>2C</sub> receptor responses in male patients with schizophrenia. ....	page 18

26. Deliberate self-harm and the nexus of violence, victimization, and mental health problems in the United States. ....	page 18
27. Construct validity of a short, self report instrument assessing emotional dysregulation. ....	page 19
28. Genomic influences on alcohol problems in a population-based sample of young adults. ....	page 19
29. The effect of renin angiotensin system genetic variants in acute pancreatitis. ....	page 20
30. Interaction effects between the 5-hydroxy tryptamine transporter-linked polymorphic region (5-HTTLPR) genotype and family conflict on adolescent alcohol use and misuse. ....	page 21
31. Associations between use of pharmacological aids in a smoking cessation attempt and subsequent quitting activity: a population study. ....	page 21
32. Measuring compulsive buying behaviour: psychometric validity of three different scales and prevalence in the general population and in shopping centres. ....	page 21
33. Scotland's evidence based outcomes framework for problem drug use. ....	page 22
34. Long-term consequences of alcohol misuse in Scottish military veterans. ....	page 22
35. Mechanisms of change within motivational interviewing in relation to health behaviors outcomes: a systematic review. ....	page 23
36. The future of smoking-attributable mortality: the case of England & Wales, Denmark and the Netherlands. ....	page 23
37. A profile of callers to the new South wales quitline, australia, 2008-2011. ....	page 24
38. A longitudinal comparison of retention in buprenorphine and methadone treatment for opioid dependence in New South Wales, Australia. ....	page 24
39. Using internet snapshot surveys to enhance our understanding of the availability of the novel psychoactive substance 4-methylaminorex and 4,4'-dimethylaminorex. ....	page 25
40. Contraceptive Use and Pregnancy Outcomes among Opioid Drug-Using Women: A Retrospective Cohort Study. ....	page 25
41. Double trouble: Psychiatric comorbidity and opioid addiction-all-cause and cause-specific mortality. ....	page 26
42. A systematic review of treatments for Impulse Control Disorders and related behaviours in Parkinson's disease. ....	page 26
43. Financial incentives for smoking cessation in pregnancy: a single-arm intervention study assessing cessation and gaming. ....	page 27
44. $\alpha$ CaMKII autophosphorylation mediates neuronal activation in the hippocampal dentate gyrus after alcohol and cocaine in mice. ....	page 27
45. Self and environmental exposures to drinking, smoking, gambling or video game addiction are associated with adult hypertension, heart and cerebrovascular diseases, allergy, self-rated health and happiness: Japanese General Social Survey, 2010. ....	page 28
46. First- versus second-generation electronic cigarettes: predictors of choice and effects on urge to smoke and withdrawal symptoms. ....	page 28
47. Reversal of opioid overdose syndrome in morphine-dependent rats using buprenorphine. ....	page 29
48. Are genetic variants for tobacco smoking associated with cannabis involvement? ....	page 29
49. The imaging spectrum of pulmonary tuberculosis. ....	page 29
50. Toward a cultural adaptation of pharmacotherapy: Latino views of depression and antidepressant therapy. ....	page 30
51. Monitoring systems and national surveys on prison health in France and abroad. ....	page 31
52. Punishing parents: child removal in the context of drug use. ....	page 31
53. Assessing traumatic experiences in screening for PTSD in substance use disorder patients: What is the gain in addition to PTSD symptoms? ....	page 31
54. What adolescents enrolled in genomic addiction research want to know about conflicts of interest. ....	page 32

55. Multi-dimensional correlates of Internet addiction symptoms in adolescents with attention-deficit/hyperactivity disorder. ....	page 32
56. Long-term outcomes from the National Drug Abuse Treatment Clinical Trials Network Prescription Opioid Addiction Treatment Study. ....	page 33
57. The effects of piracetam on heroin-induced CPP and neuronal apoptosis in rats. ....	page 33
58. Should pathological gambling and obesity be considered addictive disorders? A factor analytic study in a nationally representative sample. ....	page 34
59. Ex vivo effects of ibogaine on the activity of antioxidative enzymes in human erythrocytes. ....	page 34
60. Investigating the microstructural and neurochemical environment within the basal ganglia of current methamphetamine abusers. ....	page 35
61. Escalation of cocaine consumption in short and long access self-administration procedures. ....	page 35
62. Trends in abuse and misuse of prescription opioids among older adults. ....	page 36
63. Quetiapine for the treatment of cocaine use disorder. ....	page 36
64. Within-prison drug injection among HIV-infected male prisoners in Indonesia: A highly constrained choice. ....	page 37
65. Predicting use of assistance when quitting: A longitudinal study of the role of quitting beliefs. ....	page 37
66. Influence of dorsolateral prefrontal cortex and ventral striatum on risk avoidance in addiction: A mediation analysis. ....	page 38
67. Prenatal stress alters sensitivity to benzodiazepines in adult rats. ....	page 38
68. Hypothalamic-pituitary-adrenal axis activity in patients with pathological gambling and internet use disorder. ....	page 39
69. The relationship of DSM-IV pathological gambling to compulsive buying and other possible spectrum disorders: Results from the Iowa PG family study. ....	page 39
70. [(3)H]Ifenprodil binding in post-mortem brains of Cloninger type 1 and 2 alcoholics: A whole-hemisphere autoradiography study. ....	page 40
71. Inflammatory response in heroin addicts undergoing methadone maintenance treatment. ....	page 40
72. The association between heroin expenditure and dopamine transporter availability-A single-photon emission computed tomography study. ....	page 41
73. Co-occurrence of alcohol use disorder and behavioral addictions: relevance of impulsivity and craving. ....	page 41
74. Challenges to implementing opioid substitution therapy in Ukrainian prisons: Personnel attitudes toward addiction, treatment, and people with HIV/AIDS. ....	page 41
75. Ecological momentary assessment in the investigation of craving and substance use in daily life: a systematic review. ....	page 42
76. Exploration of the telescoping effect among not-in-treatment, intensive heroin-using research volunteers. ....	page 42
77. Fatal poisoning in drug addicts in the Nordic countries in 2012. ....	page 43
78. Evaluation of poly-drug use in methadone-related fatalities using segmental hair analysis. ....	page 44
79. Detection of methamphetamine and its main metabolite in fingermarks by liquid chromatography-mass spectrometry. ....	page 44
80. Explaining the effects of electronic cigarettes on craving for tobacco in recent quitters. ....	page 45
81. Police bribery and access to methadone maintenance therapy within the context of drug policy reform in Tijuana, Mexico. ....	page 45
82. Suicidal ideation and lifetime attempts in substance and gambling disorders. ....	page 46
83. The reductions in monetary cost and gains in productivity with methadone maintenance treatment: one year follow-up. ....	page 46

84. Changes in brain-derived neurotrophic factor (BDNF) during abstinence could be associated with relapse in cocaine-dependent patients. ....	page 47
85. Cognitive manifestations of drinking-smoking associations: preliminary findings with a cross-primed Stroop task. ....	page 47
86. Continuous exposure to dizocilpine facilitates the acquisition and escalation of cocaine consumption in male Sprague-Dawley rats. ....	page 48
87. Animal models to assess the abuse liability of tobacco products: effects of smokeless tobacco extracts on intracranial self-stimulation. ....	page 48
88. Dependence levels in users of electronic cigarettes, nicotine gums and tobacco cigarettes. ....	page 49
89. Upstream open reading frames regulate cannabinoid receptor 1 expression under baseline conditions and during cellular stress. ....	page 49
90. The impact of a Housing First randomized controlled trial on substance use problems among homeless individuals with mental illness. ....	page 50
91. A generalized matching law analysis of cocaine vs. food choice in rhesus monkeys: effects of candidate 'agonist-based' medications on sensitivity to reinforcement. ....	page 50
92. Effect of the environmental enrichment on the severity of psychological dependence and voluntary methamphetamine consumption in methamphetamine withdrawn rats. ....	page 51
93. Psychophysiology of pain and opioid use: implications for managing pain in patients with an opioid use disorder. ....	page 51
94. Reward-based decision making in pathological gambling: the roles of risk and delay. ....	page 52
95. Changes in resting EEG following methadone treatment in opiate addicts. ....	page 52

## Search History

---

1. Medline; exp SUBSTANCE-RELATED DISORDERS/; 227764 results.
2. Medline; addict\*.ti,ab; 43919 results.
3. Medline; "substance abuse".ti,ab; 18133 results.
4. Medline; exp GREAT BRITAIN/; 304814 results.
5. Medline; "united kingdom".ti,ab; 26086 results.
6. Medline; "great britain".ti,ab; 9532 results.
7. Medline; England.ti,ab; 34265 results.
8. Medline; Scotland.ti,ab; 12228 results.
9. Medline; Ireland.ti,ab; 74448 results.
10. Medline; UK.ti,ab; 71147 results.
11. Medline; Wales.ti,ab; 17002 results.
12. Medline; GB.ti,ab; 7764 results.
13. Medline; exp IRELAND/; 13420 results.
14. Medline; "British Isles".ti,ab; 2006 results.
15. Medline; "Channel Islands".ti,ab; 114 results.
16. Medline; 1 OR 2 OR 3; 251476 results.
17. Medline; 4 OR 5 OR 6 OR 7 OR 8 OR 9 OR 10 OR 11 OR 12 OR 13 OR 14; 461662 results.
18. Medline; 16 AND 17; 9274 results.
19. Medline; 18 [Limit to: Publication Year Current-2015]; 95 results.

## 1. Predictive validity of the START for unauthorised leave and substance abuse in a secure mental health setting: A pseudo-prospective cohort study.

**Citation:** International journal of nursing studies, May 2015, vol. 52, no. 5, p. 970-979 (May 2015)

**Author(s):** O'Shea, Laura E; Dickens, Geoffrey L

**Abstract:** Risk assessment and management is central to the nursing role in forensic mental health settings. The Short Term Assessment of Risk and Treatability (START) aims to support assessment through identification of risk and protective factors. It has demonstrated predictive validity for aggression; it also aims to aid risk assessment for unauthorised leave and substance abuse where its performance is relatively untested. To test the predictive validity of the START for unauthorised leave and substance abuse. A naturalistic, pseudo-prospective cohort study. Four centres of a large UK provider of secure inpatient mental health services. Inpatients resident between May 2011 and October 2013 who remained in the service for 3-months following assessment with the START by their clinical team. Exclusion criteria were missing assessment data in excess of prorating guidelines. Of 900 eligible patients 73 were excluded leaving a final sample size of n=827 (response rate 91.9%). Mean age was 38.5 years (SD=16.7); most participants (72.2%) were male; common diagnoses were schizophrenia-type disorders, personality disorders, organic disorders, developmental disorders and intellectual disability. Routinely conducted START assessments were gathered. Subsequent incidents of substance abuse and unauthorised leave were coded independently. Positive and negative predictive values of low and elevated risk were calculated. Receiver Operating Characteristic analysis was conducted to ascertain the predictive accuracy of the assessments based on their sensitivity and specificity. Patient-based rates of unauthorised leave (2.4%) and substance abuse (1.6%) were low. The positive and negative predictive values for unauthorised leave were 5.9% and 98.4%; and for substance abuse 8.1% and 99.0%. The START specific risk estimate for unauthorised leave predicted its associated outcome (Area under the curve=.659, p

**Subject Headings:** [Nursing](#)  
[Index Medicus](#)

**Source:** Medline

## 2. The globalization of addiction research: capacity-building mechanisms and selected examples.

**Citation:** Harvard review of psychiatry, Mar 2015, vol. 23, no. 2, p. 147-156 (2015 Mar-Apr)

**Author(s):** Rawson, Richard A; Woody, George; Kresina, Thomas F; Gust, Steven

**Abstract:** Over the past decade, the amount and variety of addiction research around the world has increased substantially. Researchers in Australia, Canada, United Kingdom, United States, and western Europe have significantly contributed to knowledge about addiction and its treatment. However, the nature and context of substance use disorders and the populations using drugs are far more diverse than is reflected in studies done in Western cultures. To stimulate new research from a diverse set of cultural perspectives, the National Institute on Drug Abuse (NIDA) has promoted the development of addiction research capacity and skills around the world for over 25 years. This review will describe the programs NIDA has developed to sponsor international research and research fellows and will provide some examples of the work NIDA has supported. NIDA fellowships have allowed 496 individuals from 96 countries to be trained in addiction research. The United Arab Emirates and Saudi Arabia have recently developed funding to support addiction research to study, with advice from NIDA, the substance use disorder problems that affect their societies. Examples from Malaysia, Tanzania, Brazil, Russian Federation, Ukraine, Republic of Georgia, Iceland, China, and Vietnam are used to illustrate research being conducted with NIDA support. Health services research, collaboratively funded by the U.S. National Institutes of Health and Department of State, addresses a range of addiction service development questions in low- and middle-income countries. Findings have expanded the understanding of addiction and its treatment, and are enhancing the ability of practitioners and policy makers to address substance use disorders.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

### 3. Regional alcohol consumption and alcohol-related mortality in Great Britain: novel insights using retail sales data.

**Citation:** BMC public health, Jan 2015, vol. 15, p. 1. (2015)

**Author(s):** Robinson, Mark; Shipton, Deborah; Walsh, David; Whyte, Bruce; McCartney, Gerry

**Abstract:** Regional differences in population levels of alcohol-related harm exist across Great Britain, but these are not entirely consistent with differences in population levels of alcohol consumption. This incongruence may be due to the use of self-report surveys to estimate consumption. Survey data are subject to various biases and typically produce consumption estimates much lower than those based on objective alcohol sales data. However, sales data have never been used to estimate regional consumption within Great Britain (GB). This ecological study uses alcohol retail sales data to provide novel insights into regional alcohol consumption in GB, and to explore the relationship between alcohol consumption and alcohol-related mortality. Alcohol sales estimates derived from electronic sales, delivery records and retail outlet sampling were obtained. The volume of pure alcohol sold was used to estimate per adult consumption, by market sector and drink type, across eleven GB regions in 2010-11. Alcohol-related mortality rates were calculated for the same regions and a cross-sectional correlation analysis between consumption and mortality was performed. Per adult consumption in northern England was above the GB average and characterised by high beer sales. A high level of consumption in South West England was driven by on-trade sales of cider and spirits and off-trade wine sales. Scottish regions had substantially higher spirits sales than elsewhere in GB, particularly through the off-trade. London had the lowest per adult consumption, attributable to lower off-trade sales across most drink types. Alcohol-related mortality was generally higher in regions with higher per adult consumption. The relationship was weakened by the South West and Central Scotland regions, which had the highest consumption levels, but discordantly low and very high alcohol-related mortality rates, respectively. This study provides support for the ecological relationship between alcohol-related mortality and alcohol consumption. The synthesis of knowledge from a combination of sales, survey and mortality data, as well as primary research studies, is key to ensuring that regional alcohol consumption, and its relationship with alcohol-related harms, is better understood.

**Subject Headings:** [Commerce](#)  
[Humans](#)  
[Beer](#)  
[Index Medicus](#)  
[Alcohol-Related Disorders](#)  
[Great Britain](#)  
[Alcohol Drinking](#)  
[Adult](#)  
[Alcoholic Beverages](#)  
[Wine](#)  
[Cross-Sectional Studies](#)

**Source:** Medline

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

Available from *National Library of Medicine* in [BMC Public Health](#)

Available from *BioMedCentral* in [BMC Public Health](#)

### 4. Healthcare seeking and hospital admissions by people who inject drugs in response to symptoms of injection site infections or injuries in three urban areas of England.

**Citation:** Epidemiology and infection, Jan 2015, vol. 143, no. 1, p. 120-131 (January 2015)

**Author(s):** Hope, V D; Ncube, F; Parry, J V; Hickman, M

**Abstract:** People who inject drugs (PWID) are vulnerable to infections and injuries at injection sites. The factors associated with reporting symptoms of these, seeking related advice, and hospital admission are examined. PWID were recruited in Birmingham, Bristol and Leeds using respondent-driven sampling (N = 855). During the preceding year, 48% reported having redness, swelling and tenderness (RST), 19% an abscess, and 10% an open wound at an injection site. Overall, 54% reported  $\geq 1$  symptoms, with 45% of these seeking medical advice (main sources emergency departments and General Practitioners). Advice was often sought  $\geq 5$  days after the symptom first appeared (44% of those seeking advice about an abscess, 45% about an open wound, and 35% for RST); the majority received antibiotics. Overall, 9.5% reported hospital admission during the preceding year. Ever being diagnosed with septicaemia and endocarditis were reported by 8.8% and 2.9%, respectively. Interventions are needed to reduce morbidity, healthcare burden and delays in accessing treatment.

**Subject Headings:** [Patient Acceptance of Health Care](#)  
[England](#)  
[Hospitalization](#)  
[Adolescent](#)  
[Middle Aged](#)  
[Humans](#)  
[Index Medicus](#)  
[Urban Population](#)  
[Young Adult](#)  
[Adult](#)  
[Female](#)  
[Wound Infection](#)  
[Substance Abuse Intravenous](#)  
[Male](#)

**Source:** Medline

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

##### 5. Pre(natal) crime: pregnant women, substance abuse and the law.

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**Citation:** The Medico-legal journal, Mar 2015, vol. 83, no. 1, p. 43-46 (March 2015)

**Author(s):** Priaulx, Nicky

**Abstract:** Should women who consume alcohol during pregnancy be seen as committing an offence against their foetuses? If we care about our future children, this is not the place to extend the criminal law. © The Author(s) 2014 Reprints and permissions: [sagepub.co.uk/journalsPermissions.nav](http://sagepub.co.uk/journalsPermissions.nav).

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Highwire Press* in *Medico-Legal Journal*

##### 6. Plain cigarette packs do not exert Pavlovian to instrumental transfer of control over tobacco-seeking.

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**Citation:** Addiction (Abingdon, England), Jan 2015, vol. 110, no. 1, p. 174-182 (January 2015)

**Author(s):** Hogarth, Lee; Maynard, Olivia M; Munafò, Marcus R

**Abstract:** To gain insight into the potential impact of plain tobacco packaging policy, two experiments were undertaken to test whether 'prototype' plain compared with branded UK cigarette pack stimuli would differentially elicit instrumental tobacco-seeking in a nominal Pavlovian to instrumental transfer (PIT) procedure. Two experiments were undertaken at the University of Bristol UK, with a convenience sample of adult smokers (experiment 1, n = 23, experiment 2, n = 121). In both experiments, smokers were trained on a concurrent choice procedure in which two responses earned points for cigarettes and chocolate, respectively, before images of branded and plain packs were tested for capacity



to elicit the tobacco-seeking response in extinction. The primary outcome was percentage choice of the tobacco- over the chocolate-seeking response in plain pack, branded pack and no-stimulus conditions. Both experiments found that branded packs primed a greater percentage of tobacco-seeking (overall mean = 62%) than plain packs (overall mean = 53%) and the no-stimulus condition (overall mean = 52%;  $P_s \leq 0.01$ ,  $\eta p(2) s \geq 0.16$ ), and that there was no difference in percentage tobacco-seeking between plain packs and the no-stimulus condition ( $P_s \geq 0.17$ ,  $\eta p(2) s \leq 0.04$ ). Plain tobacco packs showed an overall 9% reduction in the priming of a tobacco choice response compared to branded tobacco packs. Plain packaging may reduce smoking in current smokers by degrading cue-elicited tobacco-seeking. © 2014 The Authors. *Addiction* published by John Wiley & Sons Ltd on behalf of Society for the Study of Addiction.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**7. An aid to drug dosing safety in obese children: development of a new nomogram and comparison with existing methods for estimation of ideal body weight and lean body mass.**

**Citation:** *Anaesthesia*, Feb 2015, vol. 70, no. 2, p. 176-182 (February 2015)

**Author(s):** Callaghan, L C; Walker, J D

**Abstract:** The risk of accidental over-dosing of obese children poses challenges to anaesthetists during dose calculations for drugs with serious side-effects, such as analgesics. For many drugs, dosing scalars such as ideal body weight and lean body mass are recommended instead of total body weight during weight-based dose calculations. However, the complex current methods of obtaining these dosing scalars are impractical in the peri-operative setting. Arbitrary dose adjustments and guesswork are, unfortunately, tempting solutions for the time-pressured anaesthetist. The study's aim was to develop and validate an accurate, convenient alternative. A nomogram was created and its performance compared with the standard calculation method by volunteers using measurements from 108 obese children. The nomogram was as accurate (bias 0.12 kg vs -0.41 kg, respectively,  $p = 0.4$ ), faster (mean (SD) time taken 2.8 (1.0) min (vs 3.3 (0.9) min respectively,  $p = 0.003$ ) and less likely to result in mistakes (significant errors 3% vs 19%, respectively,  $p = 0.001$ ). We present a system that simplifies estimation of ideal body weight and lean body mass in obese children, providing foundations for safer drug dose calculation. © 2014 The Association of Anaesthetists of Great Britain and Ireland.

**Subject Headings:** [Patient Safety](#)  
[Child](#)  
[Pediatric Obesity](#)  
[Nomograms](#)  
[Anesthetics](#)  
[Time Factors](#)  
[Analgesics](#)  
[Body Weight](#)  
[Humans](#)  
[Drug Dosage Calculations](#)  
[Drug Overdose](#)  
[Index Medicus](#)  
[Ideal Body Weight](#)  
[Female](#)  
[Dose-Response Relationship Drug](#)  
[Abridged Index Medicus](#)  
[Male](#)  
[Reproducibility of Results](#)  
[Body Mass Index](#)

**Source:** Medline

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

### 8. Missing data in substance abuse research? Researchers' reporting practices of sexual orientation and gender identity.

- Citation:** Drug and alcohol dependence, Feb 2015, vol. 147, p. 280-284 (February 1, 2015)
- Author(s):** Flentje, Annesa; Bacca, Cristina L; Cochran, Bryan N
- Abstract:** Lesbian, gay, bisexual, and transgender individuals are at higher risk for substance use and substance use disorders than heterosexual individuals and are more likely to seek substance use treatment, yet sexual orientation and gender identity are frequently not reported in the research literature. The purpose of this study was to identify if sexual orientation and gender identity are being reported in the recent substance use literature, and if this has changed over time. The PsycINFO and PubMed databases were searched for articles released in 2007 and 2012 using the term "substance abuse" and 200 articles were randomly selected from each time period and database. Articles were coded for the presence or absence of sexual orientation and gender identity information. Participants' sexual orientation was reported in 3.0% and 4.9% of the 2007 and 2.3% and 6.5% of the 2012 sample, in PsycINFO and PubMed sample articles, respectively, while non-binary gender identity was reported in 0% and 1.0% of the 2007 sample and 2.3% and 1.9% of the 2012 PsycINFO and PubMed sample articles. There were no differences in rates of reporting over time. Sexual orientation and gender identity are rarely reported in the substance abuse literature, and there has not been a change in reporting practices between 2007 and 2012. Recommendations for future investigators in reporting sexual orientation and gender identity are included. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

### 9. Levamisole enhances the rewarding and locomotor-activating effects of cocaine in rats.

- Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 145-150 (April 1, 2015)
- Author(s):** Tallarida, Christopher S; Tallarida, Ronald J; Rawls, Scott M
- Abstract:** The Drug Enforcement Agency estimates that 80% of cocaine seized in the United States contains the veterinary pharmaceutical levamisole (LVM). One problem with LVM is that it is producing life-threatening neutropenia in an alarming number of cocaine abusers. The neuropharmacological profile of LVM is also suggestive of an agent with modest reinforcing and stimulant effects that could enhance cocaine's addictive effects. We tested the hypothesis that LVM (ip) enhances the rewarding and locomotor stimulant effects of cocaine (ip) using rat conditioned place preference (CPP) and locomotor assays. Effects of LVM by itself were also tested. LVM (0-10mg/kg) produced CPP at 1mg/kg (P0.05); however, the combination of LVM and cocaine produced enhanced CPP compared to saline or either drug by itself (P0.05). LVM can enhance rewarding and locomotor-activating effects of low doses of cocaine in rats while possessing modest activity of its own. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

### 10. Adolescent male hazardous drinking and participation in organised activities: involvement in team sports is associated with less hazardous drinking in young offenders.

- Citation:** Criminal behaviour and mental health : CBMH, Feb 2015, vol. 25, no. 1, p. 28-41 (February 2015)
- Author(s):** Hallingberg, Britt; Moore, Simon; Morgan, Joanne; Bowen, Katharine; van Goozen, Stephanie H M

**Abstract:** There is a lack of research investigating organised activity participation and associated alcohol use in vulnerable groups. The purpose of this research was to test and compare associations between participation in organised activities and indicators of hazardous drinking between young offenders and young non-offenders. Two groups of 13-18 year-old males were recruited in Cardiff, UK: 93 young offenders and 53 non-offenders from secondary schools matched on estimated IQ, sex and socioeconomic status. Indicators of hazardous drinking were measured using the Fast Alcohol Screening Test (FAST). Organised activity participation and externalising behaviour was measured by the Youth Self Report. The Wechsler Abbreviated Scale of Intelligence was also administered. Young offenders participated in fewer organised activities and had higher FAST scores than non-offenders. Young offenders and non-offenders significantly differed on mean FAST scores if they participated in no organised activities but not if they participated in at least one team sport. Externalising behaviour problems were unrelated to participation in organised activities. Although young offenders were less likely to have participated in organised activities, for them, participation in a team sport was associated with less hazardous drinking. Vulnerable youths who might benefit most from sporting activities actually access them the least. Future research should identify the different barriers to participation that they face. © 2014 The Authors. Criminal Behaviour and Mental Health published by John Wiley & Sons, Ltd.

**Subject Headings:** [Age Factors](#)  
[Criminals](#)  
[Risk Assessment](#)  
[Adolescent](#)  
[Adolescent Behavior](#)  
[Logistic Models](#)  
[Humans](#)  
[Sports](#)  
[Alcohol Drinking](#)  
[Alcoholic Intoxication](#)  
[Schools](#)  
[Male](#)  
[Index Medicus](#)  
[Alcoholism](#)

**Source:** Medline

### 11. Does depression and substance abuse co-morbidity affect socioeconomic status? Evidence from a prospective study of urban African Americans.

**Citation:** Psychiatry research, Jan 2015, vol. 225, no. 1-2, p. 115-121 (January 30, 2015)

**Author(s):** Dagher, Rada K; Green, Kerry M

**Abstract:** Studies have established a graded association between mental health and socioeconomic status (SES). However, scarce research has examined the impact of substance use disorders (SUD) and depression comorbidity on SES. We use data from the Woodlawn Study, a longitudinal cohort study, which recruited a cohort of first graders from Chicago starting 1966-1967 (N=1242). Analyses focus on those interviewed in young adulthood and followed up through midlife. Regression analyses adjusting for childhood confounders showed that young adults with depression and SUD comorbidity had higher likelihood of having any periods of unemployment, higher likelihood of being unemployed for 3 or more months, and lower household income in midlife than those with neither disorder. Moreover, young adults with SUD without depression had higher odds of having any periods of unemployment and higher odds of being unemployed for 3 or more months than those with neither disorder. Findings point to the possibility of social selection where depression and SUD comorbidity contributes to a downward drift in SES. Clinical interventions that integrate the treatment of SUD and depression may be more effective at reducing socioeconomic disparities among minority populations. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline  
**Full Text:** Available from *Elsevier* in *Psychiatry Research*

## 12. Understanding increases in smoking prevalence: case study from France in comparison with England 2000-10.

**Citation:** Addiction (Abingdon, England), Mar 2015, vol. 110, no. 3, p. 392-400 (March 2015)  
**Author(s):** McNeill, Ann; Guignard, Romain; Beck, François; Marteau, Rosie; Marteau, Theresa M  
**Abstract:** In France, following a long-term decline in smoking prevalence, an increase in smoking was observed between 2005 and 2010, an unusual occurrence in countries in the 'mature' stage of the smoking epidemic. By contrast, smoking prevalence in England, the neighbouring country, continued its long-term decline. We identified and translated recent reports on smoking and tobacco control in France and using these assessed the main data sources on smoking and compared them with similar sources in England, in order to explore possible explanations. In France, national smoking prevalence data are collected 5-yearly, minimizing opportunities for fine-grained analysis; the comparable study in England is implemented annually. We identified several probable causes of the recent increased prevalence of smoking in France, the primary one being the absence of sufficient price rises between 2005 and 2010, due probably to the lack of a robust tobacco control strategy, which also appeared to have empowered tobacco industry influence. Funding to compensate tobacconists appears to incentivize tobacco sales and is significantly higher than tobacco control funding. Mindful of the limitations of a case-study approach, the absence of sufficient price rises in the context of a weak tobacco control strategy seems the most likely explanation for the recent increase in smoking prevalence in France. A new cancer control plan and a national smoking reduction programme have been proposed by the French government in 2014 which, depending on implementation, may reverse the trend. In both countries, the higher levels of smoking among the more disadvantaged groups are of great concern and require greater political leadership for effective action. © 2014 Society for the Study of Addiction.

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline

## 13. Adolescents' exposure to tobacco and alcohol content in YouTube music videos.

**Citation:** Addiction (Abingdon, England), Apr 2015, vol. 110, no. 4, p. 703-711 (April 2015)  
**Author(s):** Cranwell, Jo; Murray, Rachael; Lewis, Sarah; Leonardi-Bee, Jo; Dockrell, Martin; Britton, John  
**Abstract:** To quantify tobacco and alcohol content, including branding, in popular contemporary YouTube music videos; and measure adolescent exposure to such content. Ten-second interval content analysis of alcohol, tobacco or electronic cigarette imagery in all UK Top 40 YouTube music videos during a 12-week period in 2013/14; on-line national survey of adolescent viewing of the 32 most popular high-content videos. Great Britain. A total of 2068 adolescents aged 11-18 years who completed an on-line survey. Occurrence of alcohol, tobacco and electronic cigarette use, implied use, paraphernalia or branding in music videos and proportions and estimated numbers of adolescents who had watched sampled videos. Alcohol imagery appeared in 45% [95% confidence interval (CI) = 33-51%] of all videos, tobacco in 22% (95% CI = 13-27%) and electronic cigarettes in 2% (95% CI = 0-4%). Alcohol branding appeared in 7% (95% CI = 2-11%) of videos, tobacco branding in 4% (95% CI = 0-7%) and electronic cigarettes in 1% (95% CI = 0-3%). The most frequently observed alcohol, tobacco and electronic cigarette brands were, respectively, Absolut Tune, Marlboro and E-Lites. At least one of the 32 most popular music videos containing alcohol or tobacco content had been seen by 81% (95% CI = 79%, 83%) of adolescents surveyed, and of these 87% (95% CI = 85%, 89%) had re-watched at least one video. The average number of videos seen was 7.1 (95% CI = 6.8, 7.4). Girls were more likely to watch and also re-watch the videos than boys, P

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline

#### 14. The interacting effect of depressive symptoms, gender, and distress tolerance on substance use problems among residential treatment-seeking substance users.

- Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 21-26 (March 1, 2015)
- Author(s):** Ali, Bina; Seitz-Brown, C J; Daughters, Stacey B
- Abstract:** Depression is associated with substance use problems; however, the specific individual characteristics influencing this association are not well identified. Empirical evidence and theory suggest that gender and distress tolerance-defined behaviorally as an individual's ability to persist in goal-directed behavior while experiencing negative affective states-are important underlying factors in this relationship. Hence, the purpose of the current study was to examine whether gender and distress tolerance moderate the relationship between depressive symptoms and substance use problems. Participants included 189 substance users recruited from a residential substance abuse treatment center. The Short Inventory of Problems-Alcohol and Drugs scale was used to measure self-reported substance use problems. The Beck Depression Inventory was used to assess self-reported depressive symptoms. Gender was self-reported, and distress tolerance was behaviorally indexed by the Computerized Paced Auditory Serial Addition Task. Hierarchical linear regression analysis indicated a significant three-way interaction of depressive symptoms, gender, and distress tolerance on substance use problems, adjusting for relevant demographic variables, anxiety symptoms, impulsivity, as well as DSM-IV psychiatric disorders. Probing of this three-way interaction demonstrated a significant positive association between depressive symptoms and substance use problems among females with low distress tolerance. Findings indicate that female treatment-seeking substance users with high levels of depressive symptoms exhibit greater substance use problems if they also evidence low distress tolerance. Study implications are discussed, including the development of prevention and intervention programs that target distress tolerance skills. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 15. Considerations on the role of buprenorphine in recovery from heroin addiction from a UK perspective.

- Citation:** Journal of psychopharmacology (Oxford, England), Jan 2015, vol. 29, no. 1, p. 43-49 (January 2015)
- Author(s):** Nutt, David J
- Abstract:** The United Kingdom Drug Strategy emphasises recovery as a key focus in the treatment of drug dependence. A framework for recovery is defined in the Recovery-Orientated Drug Treatment report, written by an expert working group, and comprises four key phases: engagement and stabilisation, including the establishment of treatment goals; preparation for change, involving engagement in psychosocial and pharmacological interventions; active change, including detoxification and medical withdrawal; and completion, including interventions that strengthen community integration. A body of evidence supports the benefits of buprenorphine, a partial agonist at mu opioid receptors, in supporting individualised recovery based on this framework, specifically in relation to the potential for rapid stabilisation, flexibility to transition to other treatment options or achieve abstinence, effective blocking of on-top use of illicit drugs, the treatment of comorbidities through the minimisation of drug-drug interactions, and a good safety profile. In addition, the newer abuse-deterrent formulation of buprenorphine combined with the opioid antagonist naloxone is likely to strengthen recovery-orientated systems of care due to its potential to reduce misuse and diversion. Progress through the recovery journey and the ability to sustain recovery will depend on individual needs and goals and on the amount of recovery capital that individuals have developed. © The Author(s) 2014.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline

**16. Using behavioral economics to predict opioid use during prescription opioid dependence treatment.**

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- Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 62-68 (March 1, 2015)
- Author(s):** Worley, Matthew J; Shoptaw, Steven J; Bickel, Warren K; Ling, Walter
- Abstract:** Research grounded in behavioral economics has previously linked addictive behavior to disrupted decision-making and reward-processing, but these principles have not been examined in prescription opioid addiction, which is currently a major public health problem. This study examined whether pre-treatment drug reinforcement value predicted opioid use during outpatient treatment of prescription opioid addiction. Secondary analyses examined participants with prescription opioid dependence who received 12 weeks of buprenorphine-naloxone and counseling in a multi-site clinical trial (N=353). Baseline measures assessed opioid source and indices of drug reinforcement value, including the total amount and proportion of income spent on drugs. Weekly urine drug screens measured opioid use. Obtaining opioids from doctors was associated with lower pre-treatment drug spending, while obtaining opioids from dealers/patients was associated with greater spending. Controlling for demographics, opioid use history, and opioid source frequency, patients who spent a greater total amount (OR=1.30, p
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

**17. Exposure to point-of-sale displays and changes in susceptibility to smoking: findings from a cohort study of school students.**

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- Citation:** Addiction (Abingdon, England), Apr 2015, vol. 110, no. 4, p. 693-702 (April 2015)
- Author(s):** Bogdanovica, Ilze; Szatkowski, Lisa; McNeill, Ann; Spanopoulos, Dionysis; Britton, John
- Abstract:** To investigate the association between frequency of visiting shops and noticing of tobacco point-of-sale (PoS) displays and the development of susceptibility to smoking, or smoking uptake, in secondary school students. Two surveys of a school based cohort study carried out in 2011 and 2012. Nottinghamshire, UK. A total of 2270 children aged 11-16 years from eight schools in Nottinghamshire. We investigated changes in susceptibility to smoking and smoking status in relation to frequency of visiting shops and noticing PoS displays and number of tobacco brands recognized, controlling for a range of potential confounders. Susceptibility to smoking was defined using a set of three questions covering intentions to try smoking, to smoke within the next year and likelihood of smoking if a best friend offered a cigarette. For the analysis we used multinomial logistic regression. Among non-susceptible never smokers, noticing PoS displays more frequently was associated independently with an increased risk of becoming susceptible to smoking [adjusted relative risk ratio (RRR) = 1.74; 99% confidence interval (CI) = 1.13-2.69], but was not associated with smoking uptake. Recognizing a higher number of brands among non-susceptible never smokers doubled the risk of becoming susceptible to smoking and of becoming a smoker, but this did not have a significant effect on transition to smoking among susceptible never smokers. Frequency of noticing tobacco PoS displays was not associated significantly with smoking uptake among those who were susceptible never smokers at baseline. Noticing tobacco point-of-sale displays more often and recognizing a higher number of tobacco brands is associated with an increased risk of becoming susceptible to smoking among adolescents in the United Kingdom, and recognizing a higher number of brands is associated positively with an increased risk of smoking uptake. © 2014 Society for the Study of Addiction.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline

**18. Replicating cluster subtypes for the prevention of adolescent smoking and alcohol use.**

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- Citation:** Addictive behaviors, Jan 2015, vol. 40, p. 57-65 (January 2015)
- Author(s):** Babbin, Steven F; Velicer, Wayne F; Paiva, Andrea L; Brick, Leslie Ann D; Redding, Colleen A
- Abstract:** Substance abuse interventions tailored to the individual level have produced effective outcomes for a wide variety of behaviors. One approach to enhancing tailoring involves using cluster analysis to identify prevention subtypes that represent different attitudes about substance use. This study applied this approach to better understand tailored interventions for smoking and alcohol prevention. Analyses were performed on a sample of sixth graders from 20 New England middle schools involved in a 36-month tailored intervention study. Most adolescents reported being in the Acquisition Precontemplation (aPC) stage at baseline: not smoking or not drinking and not planning to start in the next six months. For smoking (N=4059) and alcohol (N=3973), each sample was randomly split into five subsamples. Cluster analysis was performed within each subsample based on three variables: Pros and Cons (from Decisional Balance Scales), and Situational Temptations. Across all subsamples for both smoking and alcohol, the following four clusters were identified: (1) Most Protected (MP; low Pros, high Cons, low Temptations); (2) Ambivalent (AM; high Pros, average Cons and Temptations); (3) Risk Denial (RD; average Pros, low Cons, average Temptations); and (4) High Risk (HR; high Pros, low Cons, and very high Temptations). Finding the same four clusters within aPC for both smoking and alcohol, replicating the results across the five subsamples, and demonstrating hypothesized relations among the clusters with additional external validity analyses provide strong evidence of the robustness of these results. These clusters demonstrate evidence of validity and can provide a basis for tailoring interventions. Copyright © 2014. Published by Elsevier Ltd.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

#### 19. Adolescent cannabis and tobacco use and educational outcomes at age 16: birth cohort study.

- Citation:** Addiction (Abingdon, England), Apr 2015, vol. 110, no. 4, p. 658-668 (April 2015)
- Author(s):** Stiby, Alexander I; Hickman, Matthew; Munafò, Marcus R; Heron, Jon; Yip, Vikki L; Macleod, John
- Abstract:** To investigate the relationship between cannabis and tobacco use by age 15 and subsequent educational outcomes. Birth cohort study. England. The sample was drawn from the Avon Longitudinal Study of Parents and Children; a core sample of 1155 individuals had complete information on all the variables. The main exposures were cannabis and tobacco use at age 15 assessed in clinic by computer-assisted questionnaire and serum cotinine. The main outcomes were performance in standardized assessments at 16 [Key Stage 4, General Certificate of Secondary Education (GCSE)] in English and mathematics (mean scores), completion of five or more assessments at grade C level or higher and leaving school having achieved no qualifications. Analyses were sequentially adjusted for multiple covariates using a hierarchical approach. Covariates considered were: maternal substance use (ever tobacco or cannabis use, alcohol use above recommended limits); life course socio-economic position (family occupational class, maternal education, family income); child sex; month and year of birth; child educational attainment prior to age 11 (Key Stage 2); child substance use (tobacco, alcohol and cannabis) prior to age 15 and child conduct disorder. In fully adjusted models both cannabis and tobacco use at age 15 were associated with subsequent adverse educational outcomes. In general, the dose-response effect seen was consistent across all educational outcomes assessed. Weekly cannabis use was associated negatively with English GCSE results [grade point difference (GPD), -5.93, 95% confidence interval (CI) = -8.34, -3.53] and with mathematics GCSE results (GPD, -6.91, 95% CI = -9.92, -3.89). Daily tobacco smoking was associated negatively with English GCSE (GPD, -11.90, 95% CI = -13.47, -10.33) and with mathematics GCSE (GPD, -16.72, 95% CI = -18.57, -14.86). The greatest attenuation of these effects was seen on adjustment for other substance use and conduct disorder. Following adjustment, tobacco appeared to have a consistently stronger

effect than cannabis. Both cannabis and tobacco use in adolescence are associated strongly with subsequent adverse educational outcomes. Given the non-specific patterns of association seen and the attenuation of estimates on adjustment, it is possible that these effects arise through non-causal mechanisms, although a causal explanation cannot be discounted. © 2015 Society for the Study of Addiction. © 2014 The Authors. Addiction published by John Wiley & Sons Ltd on behalf of Society for the Study of Addiction.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**20. Evaluation of the effectiveness of early or delayed treatment upon healing of mandibular fractures: A retrospective study.**

**Citation:** European journal of dentistry, Jan 2015, vol. 9, no. 1, p. 87-91, 1305-7456 (2015 Jan-Mar)

**Author(s):** Gazal, Giath

**Abstract:** This study was aimed to assess the impacts of delay treatment of mandibular fracture and its complications. In addition risk variables related such as time to repair, fracture types, substance abuse, causes, surgical management, muddling or complications and duration of clinic stay were also evaluated. The data of patients attending the Newcastle General Hospital, UK for the management of mandibular fractures were probed. This retrospective clinical trial conducted over 6 months, included 91 patients attending trauma operating theatre during weekdays or weekends. Data were analyzed for time to admission and treatment and its relationships to various factors using SPSS version 20 (SPSS Inc., Chicago, IL). Time to treatment from the point of admission was  $31.50 \pm 3.83$  h during week days that has been significantly more for patients attending the hospital at weekends or nights. Similar trend was observed for total summative time from the incident to treatment analysis. This investigation has demonstrated that the rate of infection and postoperative complications following surgical treatment of mandible fractures can be eased off by reducing the waiting time from presentation to the emergency and to the operating theater.

**Subject Headings:**

**Source:** Medline

**Full Text:** Available from *National Library of Medicine* in [European Journal of Dentistry](#)

**21. Drug use, health and social outcomes of hard-to-treat heroin addicts receiving supervised injectable opiate treatment: secondary outcomes from the Randomized Injectable Opioid Treatment Trial (RIOTT).**

**Citation:** Addiction (Abingdon, England), Mar 2015, vol. 110, no. 3, p. 479-490 (March 2015)

**Author(s):** Metrebian, Nicola; Groshkova, Teodora; Hellier, Jennifer; Charles, Vikki; Martin, Anthea; Forzisi, Luciana; Lintzeris, Nicholas; Zador, Deborah; Williams, Hugh; Carnwath, Tom; Mayet, Soraya; Strang, John

**Abstract:** The Randomized Injectable Opioid Treatment Trial (RIOTT) compared supervised injectable heroin (SIH) and supervised injectable methadone (SIM) with optimized oral methadone (OOM) (ISRCTN0133807). Heroin addicts (previously unresponsive to treatment) made significant reductions in street heroin use at 6 months when treated with SIH. We now examine secondary outcomes. Multi-site randomized controlled trial (RCT) comparing SIH versus OOM and SIM versus OOM. Three supervised injectable opiate clinics in England. Chronic refractory heroin addicts continuing to inject street heroin virtually daily despite oral substitution treatment (n = 127), randomized to either SIH(n = 43), SIM(n = 42) or OOM(n = 42). All received high levels of medical and psychosocial support. wider drug use, crime, health and social functioning at 6 months. At 6 months, no significant differences were found between treatment groups in wider drug use (crack/cocaine, benzodiazepines, alcohol), physical and mental health (SF-36) or social functioning. Within each treatment group, significant reductions were observed in crime [SIH = odds ratio (OR) 0.05; P

**Subject Headings:** [Index Medicus](#)



**Source:** Medline

**22. Risk factors for alcoholism in the Oklahoma Family Health Patterns project: Impact of early life adversity and family history on affect regulation and personality.**

**Citation:** Drug and alcohol dependence, May 2015, vol. 150, p. 38-45 (May 1, 2015)

**Author(s):** Sorocco, Kristen H; Carnes, Nathan C; Cohoon, Andrew J; Vincent, Andrea S; Lovallo, William R

**Abstract:** This study examined the impact of early lifetime adversity (ELA) on affect regulation and personality in persons with family history (FH+) and without (FH-) a family history of alcoholism. We examined the impact of early life adversity in healthy young adults, 18-30 years of age enrolled in a long-term study on risk for alcohol and other substance abuse. ELA was assessed by a composite score of low socioeconomic status and personal experience of physical or sexual abuse and/or separation from parents before age 16, resulting in a score of 0, 1-2, or >3 adverse events. Unstable affect regulation and personality variables were obtained via self-report measures. Higher ELA scores were seen in FH+ ( $\chi^2=109.2$ , p

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

**23. A population-based Swedish Twin and Sibling Study of cannabis, stimulant and sedative abuse in men.**

**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 49-54 (April 1, 2015)

**Author(s):** Kendler, Kenneth S; Ohlsson, Henrik; Maes, Hermine H; Sundquist, Kristina; Lichtenstein, Paul; Sundquist, Jan

**Abstract:** Prior studies, utilizing interview-based assessments, suggest that most of the genetic risk factors for drug abuse (DA) are non-specific with a minority acting specifically on risk for abuse of particular psychoactive substance classes. We seek to replicate these findings using objective national registry data. We examined abuse of cannabis, stimulants (including cocaine) and sedatives ascertained from national Swedish registers in male-male monozygotic (1720 pairs) and dizygotic twins (1219 pairs) combined with near-age full siblings (76,457 pairs) to provide sufficient power. Modeling was performed using Mx. A common pathway model fitted better than an independent pathway model. The latent liability to DA was highly heritable but also influenced by shared environment. Cannabis, stimulant and sedative abuse all loaded strongly on the common factor. Estimates for the total heritability for the three forms of substance abuse ranged from 64 to 70%. Between 75 and 90% of that genetic risk was non-specific, coming from the common factor with the remainder deriving from substance specific genetic risk factors. By contrast, all of the shared environmental effects, which accounted for 18-20% of the variance in liability, were non-specific. In accord with prior studies based on personal interviews, the large preponderance of genetic risk factors for abuse of specific classes of psychoactive substance are non-specific. These results suggest that genetic variation in the primary sites of action of the psychoactive drugs, which differ widely across most drug classes, play a minor role in human individual differences in risk for DA. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

**24. Independent effects of HIV infection and cocaine dependence on neurocognitive impairment in a community sample living in the southern United States.**

**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 128-135 (April 1, 2015)

**Author(s):** Meade, Christina S; Towe, Sheri L; Skalski, Linda M; Robertson, Kevin R

**Abstract:** Prior studies have established that methamphetamine and HIV can have additive deleterious effects on neurocognitive functioning, but there has been relatively little research on other stimulants like cocaine. This study investigated the effects of cocaine and HIV on neurocognitive impairment in a large, well-characterized sample. The sample included 193 adults across four groups: HIV-positive cocaine users (n=48), HIV-negative cocaine users (n=53), HIV-positive non-drug users (n=60), and HIV-negative non-drug users (n=32). Cocaine users met criteria for lifetime dependence and had past-month cocaine use. A comprehensive battery assessed substance abuse and neurocognitive functioning. Participants were mostly male (66%) and African-American (85%), with a mean age of 46.09 years. The rate of global impairment was 33%, with no significant main effects across groups on likelihood of impairment. There were main effects for cocaine on processing speed and executive functioning, with cocaine users having greater impairment ( $F=9.33$  and  $F=4.22$ , respectively), and for HIV on attention, with HIV-infected persons having greater impairment ( $F=5.55$ ). There was an interaction effect for executive functioning, with the three patient groups having greater impairment than controls ( $F=5.05$ ). Nonparametric analyses revealed significant additive impairment in the presence of both HIV and cocaine for processing speed. While cocaine does not appear to increase vulnerability to global HIV-associated neurocognitive impairment, it does have independent adverse effects on executive functioning and processing speed. Given prior evidence that domain-specific deficits predict real-world impairments, our results may help explain the poorer behavioral and functional outcomes observed in HIV-infected cocaine users. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 25. Decreased serotonin<sub>2C</sub> receptor responses in male patients with schizophrenia.

**Citation:** Psychiatry research, Mar 2015, vol. 226, no. 1, p. 308-315 (March 30, 2015)

**Author(s):** Lee, Myung Ae; Jayathilake, Karuna; Sim, Min Young; Meltzer, Herbert Y

**Abstract:** Serotonin (5-HT)<sub>2C</sub> receptors in brain affect psychosis, reward, substance abuse, anxiety, other behaviors, appetite, body temperature, and other physiological measures. They also have been implicated in antipsychotic drug efficacy and side effects. We previously reported that the hyperthermia following administration of MK-212, a predominantly 5-HT<sub>2C</sub> receptor agonist, was diminished in a small sample of patients with schizophrenia (SCH), suggesting decreased 5-HT<sub>2C</sub> receptor responsiveness. We have now studied the responses to oral MK-212 and placebo in a larger sample of unmedicated male SCH (n=69) and normal controls (CON) (n=33), and assessed the influence of comorbid substance abuse (SA) on oral body temperature, behavioral responses, etc. The placebo-adjusted oral body temperature response to MK-212 was significantly lower in SCH compared to CON and not significantly different between the SCH with or without SA. Some behavioral responses to MK-212, e.g. self-rated feelings of increased anxiety, depression and decreased calmness, or good overall feeling, were significantly lower in the SCH patients compared to CON. These results add to the evidence for diminished 5-HT<sub>2C</sub> receptor responsiveness in SCH patients compared to CON and are consistent with reported association of HTR<sub>2C</sub> polymorphisms, leading to decreased expression or function of the HTR<sub>2C</sub> in patients with SCH. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

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

#### 26. Deliberate self-harm and the nexus of violence, victimization, and mental health problems in the United States.

**Citation:** Psychiatry research, Feb 2015, vol. 225, no. 3, p. 588-595 (February 28, 2015)

**Author(s):** Vaughn, Michael G; Salas-Wright, Christopher P; DeLisi, Matt; Larson, Matthew

**Abstract:** Deliberate self-harm (DSH) is associated with diverse psychiatric diagnoses and broad psychopathology but less is known about its association with other forms of interpersonal violence and crime. Using the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC), the current study examined linkages between not only DSH and mental health and substance abuse comorbidity, but also childhood abuse, lifetime victimization, and a variety of violent behaviors. We identified a prevalence of 2.91% for DSH and found that DSH is associated with generalized and severe psychopathology, wide-ranging substance abuse, and adverse childhood experiences. Contrary to other studies, we found significant racial and ethnic differences in DSH. African-American, Latinos, and Asians, were substantially less likely than Whites to report DSH. Our hypothesis that DSH would be associated with a variety of violent behaviors including robbery, intimate partner violence, forced sex, cruelty to animals, and use of a weapon was supported even after adjusting for an array of covariates. We extend previous research on DSH by examining its prevalence in one the largest comorbidity surveys ever conducted and show that DSH is associated with multiple forms of violent behavior toward others, including animals. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

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

#### 27. Construct validity of a short, self report instrument assessing emotional dysregulation.

**Citation:** Psychiatry research, Jan 2015, vol. 225, no. 1-2, p. 85-92 (January 30, 2015)

**Author(s):** Powers, Abigail; Stevens, Jennifer; Fani, Negar; Bradley, Bekh

**Abstract:** There is a need for a brief measure of emotion dysregulation that can be used in large-scale studies. This study evaluated the construct validity of a short, self-report instrument of emotion dysregulation. Subjects (N=2197) were recruited from primary care clinics of an urban public hospital as part of a study of trauma-related risk and resilience. Emotion dysregulation was measured using the Emotion Dysregulation Scale, short version (EDS-short), a 12-item self-report measure assessing emotional experiencing, cognition, and behavior. EDS-short was first compared with the Difficulties in Emotion Regulation Scale (DERS). Then, the construct validity of the EDS-short in predicting depression, posttraumatic stress, substance abuse, borderline pathology, suicide attempts, psychiatric hospitalizations, positive affect, and resiliency was assessed. We found a significant positive correlation between EDS-short and DERS. The EDS-short was significantly predictive of higher reported depressive, posttraumatic stress, substance abuse, and borderline symptoms, and lower reported positive affect and resiliency, over and above demographic characteristics and negative affect. Our results demonstrate that the EDS-short is a useful instrument for measuring emotion dysregulation in traumatized populations. A brief measure of emotion dysregulation is critical as the field moves forward in studying the wide ranging negative effects of emotion dysregulation across psychiatric disorders and outcomes. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

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

#### 28. Genomic influences on alcohol problems in a population-based sample of young adults.

**Citation:** Addiction (Abingdon, England), Mar 2015, vol. 110, no. 3, p. 461-470 (March 2015)

**Author(s):** Edwards, Alexis C; Aliev, Fazil; Wolen, Aaron R; Salvatore, Jessica E; Gardner, Charles O; McMahon, George; Evans, David M; Macleod, John; Hickman, Matthew; Dick, Danielle M; Kendler, Kenneth S

**Abstract:** Alcohol problems (AP) contribute substantially to the global disease burden. Twin and family studies suggest that AP are genetically influenced, although few studies have

identified variants or genes that are robustly associated with risk. This study identifies genetic and genomic influences on AP during young adulthood, which is often when drinking habits are established. We conducted a genome-wide association study of AP. We further conducted gene-based tests, gene ontology analyses and functional genomic enrichment analyses to assess genomic factors beyond single variants that are relevant to AP. The Avon Longitudinal Study of Parents and Children, a large population-based study of a UK birth cohort. Genetic and phenotypical data were available for 4304 participants. The AP phenotype was a factor score derived from items from the Alcohol Use Disorders Identification Test, symptoms of DSM-IV alcohol dependence, and three additional problem-related items. One variant met genome-wide significance criteria. Four out of 22,880 genes subjected to gene-based analyses survived a stringent significance threshold (q

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

### 29. The effect of renin angiotensin system genetic variants in acute pancreatitis.

**Citation:** Annals of surgery, Jan 2015, vol. 261, no. 1, p. 180-188 (January 2015)

**Author(s):** Skipworth, James R A; Nijmeijer, Rian M; van Santvoort, Hjalmar C; Besselink, Marc G H; Schulz, Hans-Ulrich; Kivimaki, Mika; Kumari, Meena; Cooper, Jackie A; Acharya, Jay; Shankar, Arjun; Malago, Massimo; Humphries, Steve E; Olde Damink, Steven W M; Montgomery, Hugh E

**Abstract:** We sought association of genetic variants in the renin-angiotensin system (RAS) and vitamin D system with acute pancreatitis (AP) development and severity. The endocrine RAS is involved in circulatory homeostasis through the pressor action of angiotensin II at its AT1 receptor. However, local RAS regulate growth and inflammation in diverse cells and tissues, and their activity may be suppressed by vitamin D. Intrapancreatic angiotensin II generation has been implicated in the development of AP. Five hundred forty-four white patients with AP from 3 countries (United Kingdom, 22; Germany, 136; and The Netherlands 386) and 8487 control subjects (United Kingdom 7833, The Netherlands 717) were genotyped for 8 polymorphisms of the RAS/vitamin D systems, chosen on the basis of likely functionality. The angiotensin-converting enzyme I (rather than D) allele was significantly associated with alcohol-related AP when all cohorts were combined ( $P = 0.03$ ). The renin rs5707 G (rather than A) allele was associated with AP ( $P = 0.002$ ), infected necrosis ( $P = 0.025$ ) and mortality ( $P = 0.046$ ). The association of 2 RAS polymorphisms with AP suggests the need for further detailed analysis of the role of RAS/vitamin D in the genesis or severity of AP, particularly given the ready potential for pharmacological manipulation of this system using existing marketed agents. However, further replication studies will be required before any such association is considered robust, particularly given the significant heterogeneity of AP causation and clinical course.

**Subject Headings:** [Young Adult](#)  
[Polymorphism Single Nucleotide](#)  
[Aged](#)  
[Pancreatitis Alcoholic](#)  
[Genotype](#)  
[Adolescent](#)  
[Pancreatitis](#)  
[Middle Aged](#)  
[Vitamin D](#)  
[Humans](#)  
[Renin](#)  
[Aged 80 and over](#)  
[Male](#)  
[Adult](#)  
[Female](#)  
[Renin-Angiotensin System](#)  
[Abridged Index Medicus](#)

Acute Disease  
Index Medicus  
Peptidyl-Dipeptidase A

**Source:** Medline

**Full Text:** Available from *Ovid* in *Annals of Surgery*

### 30. Interaction effects between the 5-hydroxy tryptamine transporter-linked polymorphic region (5-HTTLPR) genotype and family conflict on adolescent alcohol use and misuse.

**Citation:** Addiction (Abingdon, England), Feb 2015, vol. 110, no. 2, p. 289-299 (February 2015)

**Author(s):** Kim, Jueun; Park, Aesoon; Glatt, Stephen J; Eckert, Tanya L; Venable, Peter A; Scott-Sheldon, Lori A J; Carey, Kate B; Ewart, Craig K; Carey, Michael P

**Abstract:** To investigate whether the effects of family conflict on adolescent drinking differed as a function of 5-hydroxy tryptamine transporter-linked polymorphic region (5-HTTLPR) genotype cross-sectionally and prospectively in two independent samples of adolescents. Path analysis and multi-group analysis of two prospective datasets were conducted. United States and United Kingdom. Sample 1 was 175 adolescents in the United States (mean age = 15 at times 1 and 2 with a 6-month interval); Sample 2 was 4916 adolescents in the United Kingdom (mean age = 12 at time 1 and 15 at time 2). In both samples, demographics, tri-allelic 5-HTTLPR genotype and perceived family conflict were assessed at time 1. Alcohol use (frequency of drinking) and alcohol misuse (frequency of intoxication, frequency of drinking three or more drinks, maximum number of drinks) were assessed at times 1 and 2. A significant gene-environment interaction on alcohol misuse at time 1 was found in both sample 1 ( $\beta = 0.57$ ,  $P = 0.001$ ) and sample 2 ( $\beta = 0.19$ ,  $P = 0.01$ ), indicating that the 5-HTTLPR low-activity allele carriers exposed to higher levels of family conflict were more likely to engage in alcohol misuse than non-carriers. A significant gene-environment interaction effect on change in alcohol misuse over time was found only in sample 1 ( $\beta = 0.48$ ,  $P = 0.04$ ) but not in sample 2. Compared with non-carriers, adolescents carrying the 5-HTTLPR low-activity allele are more susceptible to the effects of family conflict on alcohol misuse. © 2014 Society for the Study of Addiction.

**Subject Headings:** Index Medicus

**Source:** Medline

### 31. Associations between use of pharmacological aids in a smoking cessation attempt and subsequent quitting activity: a population study.

**Citation:** Addiction (Abingdon, England), Mar 2015, vol. 110, no. 3, p. 513-518 (March 2015)

**Author(s):** Ferguson, Stuart G; Brown, Jamie; Frandsen, Mai; West, Robert

**Abstract:** Modelling the population impact and cost-effectiveness of smoking cessation aids is limited by lack of knowledge about how the use of aids changes across quit attempts. Here we test whether the quit method used in a previous attempt influences (i) future decisions to quit and/or (ii) treatment/s used during subsequent attempts. Data came from the Smoking Toolkit Study, a United Kingdom national household survey. Smokers ( $n = 5489$ ) who completed a baseline and 6-month follow-up questionnaire. Respondents were asked what treatment/s, grouped as: prescription medication/s [bupropion, varenicline or nicotine replacement therapy (NRT)], over-the-counter NRT or unaided that they had used in their most recent quit attempt (at baseline), and any use of treatment/s for a quit attempt in the last 3 months at follow-up. Smokers who had tried to quit at baseline were more likely to report having tried to quit again prior to follow-up [all odds ratios  $\geq 2.19$  relative to no attempt at baseline,  $P$

**Subject Headings:** Index Medicus

**Source:** Medline

### 32. Measuring compulsive buying behaviour: psychometric validity of three different scales and prevalence in the general population and in shopping centres.

- Citation:** Psychiatry research, Feb 2015, vol. 225, no. 3, p. 326-334 (February 28, 2015)
- Author(s):** Maraz, Aniko; Eisinger, Andrea; Hende, Borbála; Urbán, Róbert; Paksi, Borbála; Kun, Bernadette; Kökönyei, Gyöngyi; Griffiths, Mark D; Demetrovics, Zsolt
- Abstract:** Due to the problems of measurement and the lack of nationally representative data, the extent of compulsive buying behaviour (CBB) is relatively unknown. The validity of three different instruments was tested: Edwards Compulsive Buying Scale (ECBS; Edwards, E.A., 1993. Development of a new scale for measuring compulsive buying behaviour. *Financial Counseling and Planning*. 4, 67-85), Questionnaire About Buying Behavior (QABB; Lejoyeux, M., Ades, J., 1994. Les achats pathologiques: une addiction comportementale. *Neuro-Psy*. 9, 25-32.) and Richmond Compulsive Buying Scale (RCBS; Ridgway, N.M., Kukar-Kinney, M., Monroe, K.B., 2008. An expanded conceptualization and a new measure of compulsive buying. *Journal of Consumer Research*. 35, 622-639.) using two independent samples. One was nationally representative of the Hungarian population (N=2710) while the other comprised shopping mall customers (N=1447). As a result, a new, four-factor solution for the ECBS was developed (Edwards Compulsive Buying Scale Revised (ECBS-R)), and confirmed the other two measures. Additionally, cut-off scores were defined for all measures. Results showed that the prevalence of CBB is 1.85% (with QABB) in the general population but significantly higher in shopping mall customers (8.7% with ECBS-R, 13.3% with QABB and 2.5% with RCBS-R). Conclusively, due to the diversity of content, each measure identifies a somewhat different CBB group. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Psychiatry Research](#)

### 33. Scotland's evidence based outcomes framework for problem drug use.

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- Citation:** BMJ (Clinical research ed.), Jan 2015, vol. 350, p. h133. (2015)
- Author(s):** Dickie, Elinor
- Subject Headings:** [Substance-Related Disorders](#)  
[Scotland](#)  
[Humans](#)  
[Index Medicus](#)  
[Health Policy](#)  
[Abridged Index Medicus](#)  
[Evidence-Based Medicine](#)
- Source:** Medline

### 34. Long-term consequences of alcohol misuse in Scottish military veterans.

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- Citation:** Occupational and environmental medicine, Jan 2015, vol. 72, no. 1, p. 28-32 (January 2015)
- Author(s):** Bergman, Beverly P; Mackay, Daniel F; Pell, Jill P
- Abstract:** Serving military personnel are more likely to drink heavily than civilians. The aim of our study was to examine whether veterans have an increased risk of alcoholic liver disease and alcohol-related death compared with non-veterans. Retrospective cohort study of 57 000 veterans resident in Scotland and 173 000 age, sex and area of residence-matched civilians, using Cox proportional hazard models to compare the risk of alcoholic liver disease and alcohol-related death overall, by sex, birth cohort, length of service and year of recruitment, adjusting for socioeconomic status. Over mean 29 years follow-up, 677 (1.20%) veterans developed alcoholic liver disease compared with 2175 (1.26%) non-veterans (adjusted HR=0.91, 95% CIs 0.84 to 0.99, p=0.035). Only the 1945-1949 veterans' birth cohort was at higher risk, unadjusted HR=1.25, 95% CIs 1.07 to 1.47, p=0.004, although their difference in risk became non-significant after adjusting for socioeconomic status, p=0.052. The pattern was similar for alcohol-related death.

Veterans were less likely than non-veterans to have comorbid hepatitis C. Older age at recruitment at a time of high operational activity in the early 1970s was associated with increased risk, but longer service was not. Overall, veterans in Scotland had a significantly reduced risk of alcoholic liver disease or alcohol-related death compared with non-veterans, although the risk was higher in those born before 1950. Reasons for the changing pattern are likely to be complex and may reflect operational exposure, social attitudes to alcohol and the impact of recent military health promotion. Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to <http://group.bmj.com/group/rights-licensing/permissions>.

**Subject Headings:** [Age Factors](#)  
[Male](#)  
[Hospitalization](#)  
[Time Factors](#)  
[Middle Aged](#)  
[Scotland](#)  
[Humans](#)  
[Risk Factors](#)  
[Veterans](#)  
[Alcoholism](#)  
[Liver Diseases Alcoholic](#)  
[Adult](#)  
[Female](#)  
[Index Medicus](#)  
[Aged](#)  
[Retrospective Studies](#)  
[Follow-Up Studies](#)

**Source:** Medline

**Full Text:** Available from *Highwire Press* in *Occupational and environmental medicine*

### 35. Mechanisms of change within motivational interviewing in relation to health behaviors outcomes: a systematic review.

**Citation:** Patient education and counseling, Apr 2015, vol. 98, no. 4, p. 401-411 (April 2015)

**Author(s):** Copeland, Lauren; McNamara, Rachel; Kelson, Mark; Simpson, Sharon

**Abstract:** Motivational interviewing (MI) has been identified as an effective treatment for health behaviors. Understanding the mechanisms of MI could have practical implications for MI delivery. This review is the first to examine mechanisms within MI that affect health behavior outcomes and summarizes and evaluates the evidence. A systematic literature search was conducted in PSYCHINFO, MEDLINE and EMBASE to identify studies that delivered individual MI in the context of health behaviors, excluding addictions, and investigated mechanisms of MI. Effect sizes were calculated. 291 studies were identified and 37 met the inclusion criteria. Few of the 37 studies included, conducted mediation analyses. MI spirit and motivation were the most promising mechanisms of MI. Although self-efficacy was the most researched, it was not identified as a mechanism of MI. Study quality was generally poor. Although this review has indicated possible mechanisms by which MI could influence health behavior outcomes, it also highlights that more high quality research is needed, looking at other possible mechanisms or causal pathways within health behavior outcomes. MI spirit possibly plays an important role within MI and may potentially be used to evoke change talk which links to outcomes. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Nursing](#)

**Source:** Medline

### 36. The future of smoking-attributable mortality: the case of England & Wales, Denmark and the Netherlands.

**Citation:** Addiction (Abingdon, England), Feb 2015, vol. 110, no. 2, p. 336-345 (February 2015)

**Author(s):** Stoeldraijer, Lenny; Bonneux, Luc; van Duin, Coen; van Wissen, Leo; Janssen, Fanny

**Abstract:** We formally estimate future smoking-attributable mortality up to 2050 for the total national populations of England & Wales, Denmark and the Netherlands, providing an update and extension of the descriptive smoking-epidemic model. We used smoking prevalence and population-level lung cancer mortality data for England & Wales, Denmark and the Netherlands, covering the period 1950-2009. To estimate the future smoking-attributable mortality fraction (SAF) we: (i) project lung cancer mortality by extrapolating age-period-cohort trends, using the observed convergence of smoking prevalence and similarities in past lung cancer mortality between men and women as input; and (ii) add other causes of death attributable to smoking by applying a simplified version of the indirect Peto-Lopez method to the projected lung cancer mortality. The SAF for men in 2009 was 19% (44 872 deaths) in England & Wales, 22% (5861 deaths) in Denmark and 25% (16 385 deaths) in the Netherlands. In our projections, these fractions decline to 6, 12 and 14%, respectively, in 2050. The SAF for women peaked at 14% (38 883 deaths) in 2008 in England & Wales, and is expected to peak in 2028 in Denmark (22%) and in 2033 in the Netherlands (23%). By 2050, a decline to 9, 17 and 19%, respectively, is foreseen. Different indirect estimation methods of the SAF in 2050 yield a range of 1-8% (England & Wales), 8-13% (Denmark) and 11-16% (the Netherlands) for men, and 7-16, 12-26 and 13-31% for women. From northern European data we project that smoking-attributable mortality will remain important for the future, especially for women. Whereas substantial differences between countries remain, the age-specific evolution of smoking-attributable mortality remains similar across countries and between sexes. © 2014 Society for the Study of Addiction.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

### 37. A profile of callers to the new South wales quitline, australia, 2008-2011.

**Citation:** Nicotine & tobacco research : official journal of the Society for Research on Nicotine and Tobacco, May 2015, vol. 17, no. 5, p. 617-621 (May 2015)

**Author(s):** Grunseit, Anne C; Ding, Ding; Anderson, Caroline; Crosbie, Debra; Dunlop, Sally; Bauman, Adrian

**Abstract:** One population-level solution to smoking cessation are quitlines, telephone-based services to aid quitting. Monitoring the profile of quitline callers in a changing tobacco policy environment is important for informing future policy strategies and identifying target groups to improve the reach and impact of quitline services. De-identified data from 43,618 new callers to the New South Wales Quitline, Australia between January 2008 and October 2011 (inclusive) were extracted from the Quitline database. Regression analyses explored the effect of year of first call on the distribution of demographic and smoking-related variables. Men calling the Quitline increased proportionately (prevalence ratio [PR] = 1.05, 95% CI = 1.03-1.08), but callers from non-major city areas fell (PR = 0.90, 95% CI = 0.87-0.93) in 2011 versus 2008. The proportion of callers not working demonstrated a significant increasing linear trend (PR = 1.08, p

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

### 38. A longitudinal comparison of retention in buprenorphine and methadone treatment for opioid dependence in New South Wales, Australia.

**Citation:** Addiction (Abingdon, England), Apr 2015, vol. 110, no. 4, p. 646-655 (April 2015)

**Author(s):** Burns, Lucy; Gisev, Natasa; Larney, Sarah; Dobbins, Timothy; Gibson, Amy; Kimber, Jo; Larance, Briony; Mattick, Richard P; Butler, Tony; Degenhardt, Louisa

**Abstract:** To examine characteristics of first-time methadone and buprenorphine clients and factors associated with risk of leaving first treatment in New South Wales (NSW), Australia. Retrospective linkage study of opioid substitution therapy (OST) treatment, court, custody and mortality data. NSW, Australia. First-time OST entrants (August 2001-December 2010). Characteristics of clients were examined. Time-dependent Cox models examined factors associated with the risk of leaving first treatment, with



demographic, criminographic and treatment variables jointly considered. Interactions between medication and other variables upon risk of leaving treatment were examined. There were 15 600 treatment entrants: 7183 (46%) commenced buprenorphine, 8417 (54%) commenced methadone; the proportion entering buprenorphine increased over time. Those starting buprenorphine switched medications more frequently and had more subsequent treatment episodes. Buprenorphine retention was also poorer. On average, 44% spent 3+ months in treatment compared with 70% of those commencing methadone; however, buprenorphine retention for first-time entrants improved over time, whereas methadone retention did not. Multivariable Cox models indicated that in addition to sex, age, treatment setting and criminographic variables, the risk of leaving a first treatment episode was greater on any given day for those receiving buprenorphine, and was dependent on the year treatment was initiated. There was no interaction between any demographic variables and medication received, suggesting no clear evidence of any particular groups for whom each medication might be better suited in terms of improving retention. Although retention rates for buprenorphine treatment have improved in New South Wales, Australia, individuals starting methadone treatment still show higher retention rates. © 2014 Society for the Study of Addiction.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

### 39. Using internet snapshot surveys to enhance our understanding of the availability of the novel psychoactive substance 4-methylaminorex and 4,4'-dimethylaminorex.

**Citation:** Journal of medical toxicology : official journal of the American College of Medical Toxicology, Mar 2015, vol. 11, no. 1, p. 80-84 (March 2015)

**Author(s):** Nizar, Hisham; Dargan, Paul I; Wood, David M

**Abstract:** 4,4'-Dimethylaminorex is a stimulant novel psychoactive substance (NPS) first detected in Europe in November 2012. It is a derivative of 4-methylaminorex, a substance controlled under Schedule 1 of the 1971 United Nations Convention on Psychotropic Substances. There is currently no information on the availability or cost of these substances from Internet suppliers. An Internet snapshot study was undertaken in English using established European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) methodology to determine the availability of 4-methylaminorex and 4,4'-dimethylaminorex in April 2014. Twenty Internet sites selling 4-methylaminorex were identified, 18 selling in US dollars and two in GB Pound Sterling. Fourteen (70 %) Internet sites had a minimum purchase amount of  $\geq 10$  g (compared to user doses of 10-25 mg). For the 18 suppliers selling in US\$, 9 quoted a fixed price per gram irrespective of the amount ordered and 11 had a reducing price per gram with increasing purchase quantity (US\$30.8  $\pm$  34.2/g for 1 g purchase to US\$15.2  $\pm$  20.3/g for 1 kg purchase). Only one Internet site selling 4,4'-dimethylaminorex was identified, selling in Euros. The minimum purchase quantity was 500 mg. The price per gram reduced from 36.08/g for a 500 mg purchase to 2.20/g for a 100 g purchase. This Internet snapshot demonstrated that there was a greater availability from Internet suppliers of products advertised as 4-methylaminorex than 4,4'-dimethylaminorex, despite the 4-methylaminorex being an internationally controlled substance. Whilst this may reflect misunderstanding by suppliers, it has the potential to put those purchasing at risk of contravening border control and/or local law enforcement legislation. The use of methodology such as Internet snapshot surveys is of increasing interest to clinical/medical toxicologists in their understanding of the supply, availability and cost of novel psychoactive substances.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

### 40. Contraceptive Use and Pregnancy Outcomes among Opioid Drug-Using Women: A Retrospective Cohort Study.

**Citation:** PloS one, Jan 2015, vol. 10, no. 3, p. e0116231. (2015)

**Author(s):** Cornford, Charles S; Close, Helen J; Bray, Roz; Beere, Deborah; Mason, James M

**Abstract:** The contraceptive needs of illicit opioid users differ from non-drug users but are poorly understood. The aim of this study was to describe contraceptive use and pregnancy outcomes in opioid-using women, and to examine their association with a range of risk factors. This retrospective cohort study used UK general practice records, Treatment Outcomes Profile and National Drug Treatment Monitoring System data, and a nested data validation exercise. A cohort of 376 women aged 20-61 years were in active treatment for opioid addiction in October 2010 at two specialised primary care practices in North-East England. Outcomes were age-adjusted prevalence estimates for contraceptive use and pregnancy outcomes in users of illicit opioids. The association between lifestyle-related risk factors and contraception was explored. Drug-using women made lower use of planned (non-condom) contraception (24% vs 50%, p

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

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

#### 41. Double trouble: Psychiatric comorbidity and opioid addiction-all-cause and cause-specific mortality.

**Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 85-92 (March 1, 2015)

**Author(s):** Bogdanowicz, Karolina M; Stewart, Robert; Broadbent, Matthew; Hatch, Stephani L; Hotopf, Matthew; Strang, John; Hayes, Richard D

**Abstract:** Opioid misusers have recognized high mortality but the influence of psychiatric comorbidity in excess cause-specific mortality is unclear. Opioid use disorder (OUD) patients were identified in the South London and Maudsley Case Register. Deaths were identified through database linkage to the national mortality dataset. Standard mortality ratios were calculated to compare mortality risk with the general population. Cox and competing risk regression models were used to investigate the effect of psychiatric comorbidity and psychological health on all-cause and cause-specific mortality (respectively) in OUD patients. Of 4837 OUD patients, 176 had died. Mortality rates were substantially higher than the general population (SMR 4.23; 95%CI 3.63-4.90). Among those with OUD, comorbid personality disorder (PD) and comorbid alcohol use disorder (AUD) was associated with increased all-cause mortality in all models, including the fully adjusted model, controlling for socio-demographic factors, severity of drug use, risk behaviours and physical health (HR2.15, 95%CI 1.17-3.95; HR2.28, 95%CI 1.54-3.36). AUD was associated with increased risk of fatal overdose (HR2.57, 95%CI 1.26-5.26) and hepatic-related deaths (HR7.26, 95%CI 2.79-18.86). Individuals with OUD and comorbid PD had almost four times greater risk of liver related deaths compared to those without PD (HR3.76, 95%CI 1.21-11.74). Comorbid severe mental illness and poor psychological health were not associated with increased mortality. This study highlights the importance of assessment for PD and AUD in OUD patients in order to identify individuals at substantially elevated mortality risk to enable a more personalized approach to their medical care. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 42. A systematic review of treatments for Impulse Control Disorders and related behaviours in Parkinson's disease.

**Citation:** Psychiatry research, Feb 2015, vol. 225, no. 3, p. 402-406 (February 28, 2015)

**Author(s):** Tanwani, Puja; Fernie, Bruce A; Nikčević, Ana V; Spada, Marcantonio M

**Abstract:** Impulse Control Disorders (ICDs) are a set of behaviours characterised by impulsivity despite known harm. Related to ICDs is the dopamine dysregulation syndrome (DDS), which is characterised by an addiction-like consumption of dopaminergic medication and punning. These behaviours all have an increased prevalence in Parkinson's disease (PD).

The aim of this review is to identify treatments available for patients suffering from ICDs, DDS and punning in PD. Searches of The Cochrane Controlled Trials Register, Embase, Medline and PsychInfo were conducted, using the entire timescale available. Seven out of the 688 papers retrieved met the inclusion criteria and were considered in this systematic review. One class I study, one class II study, and five class IV studies were identified. All studies demonstrated a positive effect on ICDs in PD. Research in this field is still in its early stages. At present, there is insufficient evidence to recommend any treatment over another. There is a need for more methodologically robust research, using larger, more generalisable samples, randomisation and meaningful follow-up periods. In addition, the use of a validated outcome measures should be implemented in future research efforts. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Psychiatry Research](#)

#### 43. Financial incentives for smoking cessation in pregnancy: a single-arm intervention study assessing cessation and gaming.

**Citation:** Addiction (Abingdon, England), Apr 2015, vol. 110, no. 4, p. 680-688 (April 2015)  
**Author(s):** Ierfino, Diana; Mantzari, Eleni; Hirst, Julie; Jones, Tina; Aveyard, Paul; Marteau, Theresa M  
**Abstract:** Financial incentives were the single most effective intervention for smoking cessation in pregnancy in a recent Cochrane Review, but based on a few small trials in the United States using only 7-day point prevalence measures of cessation. This study estimates (a) prolonged cessation in an unselected population of English pregnant smokers who are offered financial incentives for quitting and (b) 'gaming', i.e. false reporting of smoking status to enter the scheme or gain an incentive. Single-arm intervention study Antenatal clinic and community A total of 239 pregnant smokers enrolled into the financial incentive scheme, attending for maternity care at one hospital in an area of high deprivation in England over a 42-week period. Smoking cessation at delivery and 6 months postpartum, assessed using salivary cotinine; gaming assessed using urinary and salivary cotinine at enrolment, 28 and 36 weeks gestation, and 2 days and 6 months postpartum. Thirty-nine per cent (239 of 615) of smokers were enrolled into the scheme, 60% (143 of 239) of whom made a quit attempt. Of those enrolled, 20% [48 of 239; 95% confidence interval (CI) = 14.9%, 25.1%] were quit at delivery and 10% (25 of 239; 95% CI = 6.2%, 13.8%) at 6 months postpartum. There was no evidence that women gamed to enter the scheme, but evidence that 4% (10 of 239) of those enrolled gamed on one or more occasions to gain vouchers. Enrolment on an incentive scheme in an unselected English cohort of pregnant smokers was associated with prolonged cessation rates comparable to those reported in US trials. Rates of gaming were arguably insufficiently high to invalidate the use of such schemes. © 2015 The Authors. Addiction published by John Wiley & Sons Ltd on behalf of Society for the Study of Addiction.

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline

#### 44. $\alpha$ CaMKII autophosphorylation mediates neuronal activation in the hippocampal dentate gyrus after alcohol and cocaine in mice.

**Citation:** Neuroscience letters, Mar 2015, vol. 591, p. 65-68 (March 30, 2015)  
**Author(s):** Schöpf, Isabella; Easton, Alanna C; Solati, Jalal; Golub, Yulia; Kornhuber, Johannes; Giese, K Peter; Müller, Christian P  
**Abstract:** Psychoactive drug-induced cellular activation is a key mechanism to promote neuronal plasticity and addiction. Alpha Ca(2+)/calmodulin-dependent protein kinase II ( $\alpha$ CaMKII) and its autophosphorylation play a key role in the development of drug use associated behaviours. It has been suggested that  $\alpha$ CaMKII autophosphorylation is necessary for drug-induced neuronal activation in the mesolimbic system. Here, we show an alcohol- and cocaine-induced increase in c-fos expression in the hippocampal dentate

gyrus, which is absent in  $\alpha$ CaMKII(T286A) autophosphorylation deficient mice. These findings may suggest a role in hippocampal  $\alpha$ CaMKII autophosphorylation in the acute neuroplastic effects of alcohol and cocaine. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

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

**45. Self and environmental exposures to drinking, smoking, gambling or video game addiction are associated with adult hypertension, heart and cerebrovascular diseases, allergy, self-rated health and happiness: Japanese General Social Survey, 2010.**

**Citation:** International journal of cardiology, Feb 2015, vol. 181, p. 403-412 (February 15, 2015)

**Author(s):** Shiue, Ivy

**Abstract:** It was aimed to study the relationships between addiction behaviors and human health and well-being in East Asians in a national and population-based setting. Data were retrieved from Japanese General Social Survey, 2010. Information on demographics, lifestyle factors, addiction behaviors and self-reported health conditions and well-being in Japanese adults was obtained by household interview. Analysis included chi-square test, logistic and multi-nominal regression modeling. Of 5003 Japanese adults (aged 20-89) included in the study cohort, 13.8%, 14.7%, 4.8% and 5.5% were addicted to drinking, smoking, gambling and video games, respectively while 10.6%, 13.8%, 4.3% and 11.4% were exposed to co-residing family member's drinking, smoking, gambling and video game addiction behaviors, respectively. People who reported addiction to drinking had poor self-rated health, hypertension and food allergy. People who reported addiction to smoking had fair to poor self-rated health, unhappiness, cerebrovascular disease and itchy skin. People who reported addiction to gambling had fair to poor self-rated health and unhappiness. People who reported addiction to video games had poor self-rated health and heart disease. People who were exposed to addiction to drinking, smoking, gambling and video games from co-residing family member(s) also reported hay fever, poor self-rated health and unhappiness. Self and environmental exposures to drinking, smoking, gambling or video game addiction are associated with adult hypertension, heart and cerebrovascular diseases, allergy, self-rated health and happiness. Future public health programs continuing to minimize self and environmental exposures to addiction behaviors tackling health concerns would still be encouraged. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Elsevier* in [International Journal of Cardiology](#)

**46. First- versus second-generation electronic cigarettes: predictors of choice and effects on urge to smoke and withdrawal symptoms.**

**Citation:** Addiction (Abingdon, England), Apr 2015, vol. 110, no. 4, p. 669-677 (April 2015)

**Author(s):** Dawkins, Lynne; Kimber, Catherine; Puwanesarasa, Yasothani; Soar, Kirstie

**Abstract:** To (1) estimate predictors of first- versus second-generation electronic cigarette (e-cigarette) choice; and (2) determine whether a second-generation device was (i) superior for reducing urge to smoke and withdrawal symptoms (WS) and (ii) associated with enhanced positive subjective effects. Mixed-effects experimental design. Phase 1: reason for e-cigarette choice was assessed via questionnaire. Phase 2: participants were allocated randomly to first- or second-generation e-cigarette condition. Urge to smoke and WS were measured before and 10 minutes after taking 10 e-cigarette puffs. University of East London, UK. A total of 97 smokers (mean age 26; standard deviation 8.7; 54% female). Single-item urge to smoke scale to assess craving and the Mood and Physical Symptoms Scale (MPSS) to assess WS. Subjective effects included: satisfaction, hit, 'felt

like smoking' and 'would use to stop smoking' (yes versus no response). Equal numbers chose each device, but none of the predictor variables (gender, age, tobacco dependence, previous e-cigarette use) accounted for choice. Only baseline urge to smoke/WS predicted urge to smoke/WS 10 minutes after use (B =0.38; P

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

#### 47. Reversal of opioid overdose syndrome in morphine-dependent rats using buprenorphine.

**Citation:** Toxicology letters, Feb 2015, vol. 232, no. 3, p. 590-594 (February 3, 2015)

**Author(s):** Zamani, Nasim; Hassanian-Moghaddam, Hossein; Bayat, Amir Hossein; Haghparast, Abbas; Shadnia, Shahin; Rahimi, Mitra; Hashemi Demaneh, Behrouz; Assar, Nasim

**Abstract:** The method of choice for reversal of opioid-toxicity is administration of naloxone. This treatment can be accompanied by complications including acute lung-injury, myocardial infarction, or withdrawal-syndrome (in dependent-patients). We aimed to evaluate the efficacy of buprenorphine in reversal of opioid-overdose syndrome in dependent-rats. A prospective case-control study was designed, in which a total of 30 rats were put on opioid-dependency protocol with 10 mg/kg of intra-peritoneal morphine twice daily for 10 days. After confirmation of dependency by naloxone administration, the rats were overdosed by giving 16 mg/kg of intra-peritoneal methadone. They were divided into four groups receiving naloxone (n=7; 2 mg/kg) and buprenorphine(n=8, 8, and 7 with doses of 3 mg/kg, 6 mg/kg, and 10 mg/kg), respectively. These four groups were compared regarding reversal of opioid signs/symptoms and development of withdrawal-syndrome. Rats in the first group showed signs/symptoms of opioid-withdrawal severely and with a higher frequency (P

**Subject Headings:** [Rats](#)  
[Animals](#)  
[Drug Overdose](#)  
[Index Medicus](#)  
[Rats Wistar](#)  
[Methadone](#)  
[Morphine Dependence](#)  
[Naloxone](#)  
[Buprenorphine](#)  
[Male](#)  
[Narcotic Antagonists](#)

**Source:** Medline

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

#### 48. Are genetic variants for tobacco smoking associated with cannabis involvement?

**Citation:** Drug and alcohol dependence, May 2015, vol. 150, p. 183-187 (May 1, 2015)

**Author(s):** Agrawal, Arpana; Lynskey, Michael T; Kapoor, Manav; Bucholz, Kathleen K; Edenberg, Howard J; Schuckit, Marc; Brooks, Andrew; Hesselbrock, Victor; Kramer, John; Saccone, Nancy; Tischfield, Jay; Bierut, Laura J

**Abstract:** Cannabis users are highly likely to also be tobacco cigarette smokers and a proportion of this comorbidity is attributable to shared genetic influences. Three large meta-analyses of genomewide association studies (GWAS) of tobacco smoking have identified multiple genomewide significant (p

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 49. The imaging spectrum of pulmonary tuberculosis.

- Citation:** Acta radiologica (Stockholm, Sweden : 1987), May 2015, vol. 56, no. 5, p. 557-564 (May 2015)
- Author(s):** Cardinale, Luciano; Parlatano, Daniela; Boccuzzi, Francesco; Onoscuri, Maurizio; Volpicelli, Giovanni; Veltri, Andrea
- Abstract:** Tuberculosis has still an important impact on public health because it is an important cause of death, particularly in developing countries. On the other hand recent studies have shown that tuberculosis is again becoming concentrated in big cities of Western Europe, especially among immigrants, drug addicts, poor people, and the homeless, despite progress in reducing national rates of the disease. Diagnostic imaging is challenging for radiologists because signs of tuberculosis may easily mimic other diseases such as neoplasms or sarcoidosis. Clinical signs and symptoms in affected adults can be non-specific and a high level of pre-test clinical suspicion based on history is fundamental in the diagnostic work-up. Impact of tuberculosis in the world is extremely important considering the high incidence estimated during 2011 that was 8.7 million cases. This article gives a review of imaging patterns of chest tuberculosis as may be detected on conventional radiography and computerized tomography (CT). The main aim is to improve radiologist's familiarity with the spectrum of imaging features of this disease and facilitate timely diagnosis. Furthermore, we consider the emerging role of alternative methods of imaging, such as magnetic resonance imaging (MRI), that can be helpful and highly accurate for a better definition of some signs of tuberculosis. © The Foundation Acta Radiologica 2014 Reprints and permissions: [sagepub.co.uk/journalsPermissions.nav](http://sagepub.co.uk/journalsPermissions.nav).
- Subject Headings:** [Index Medicus](#)
- Source:** Medline

#### 50. Toward a cultural adaptation of pharmacotherapy: Latino views of depression and antidepressant therapy.

- Citation:** Transcultural psychiatry, Apr 2015, vol. 52, no. 2, p. 244-273 (April 2015)
- Author(s):** Vargas, Sylvanna M; Cabassa, Leopoldo J; Nicasio, Anel; De La Cruz, Ana Alicia; Jackson, Elizabeth; Rosario, Melissa; Guarnaccia, Peter J; Lewis-Fernández, Roberto
- Abstract:** Relative to non-Latino Whites, Latinos in the United States with major depressive disorder (MDD) show low engagement in antidepressant therapy, whether engagement is defined as pharmacotherapy access, medication initiation, pill-taking, or treatment retention. One potential reason for this disparity in depression care is the low cultural congruence of pharmacotherapy for this population. To examine Latinos' views of depression and antidepressant therapy, we conducted qualitative interviews with 30 Latino outpatients initiating antidepressants prior to their first treatment visit using the semistructured Treatment Adherence and Retention Questionnaire. These baseline interviews were randomly selected from data collected for a randomized controlled trial testing a novel intervention to enhance engagement by depressed Latino outpatients. Participant narratives were analyzed using open coding and the iterative analytical approach derived from grounded theory. Patient views about depression addressed stigmatizing views held by others in their social circle. Most participants directly refuted these views by providing alternate explanations to depression experiences. Antidepressant therapy narratives also revealed marked stigmatization, but participants tended not to refute these views. Instead, patients expressed concerns about antidepressants and showed marked ambivalence about seeking psychiatric care. Participants, however, did suggest ways in which clinicians and patients might collaborate to address their concerns about antidepressants. Some cultural views, such as concerns about addiction to or dependence on medication, may be negotiable barriers to treatment. Prescribing clinicians should address cultural views and concerns in order to improve Latino engagement in antidepressant therapy. © The Author(s) 2015 Reprints and permissions: [sagepub.co.uk/journalsPermissions.nav](http://sagepub.co.uk/journalsPermissions.nav).
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Highwire Press* in [Transcultural Psychiatry](#)

**51. Monitoring systems and national surveys on prison health in France and abroad.**

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- Citation:** European journal of public health, Feb 2015, vol. 25, no. 1, p. 167-172 (February 2015)
- Author(s):** Verdot, Charlotte; Godin-Blandeau, Elodie; Grémy, Isabelle; Develay, Aude-Emmanuelle
- Abstract:** The implementation of a national monitoring system of prisoners' health is under consideration in France. As information available on this topic is quite scarce, particularly in Europe, a study was performed to identify and describe various prison health monitoring approaches implemented worldwide. Data were collected for 15 countries in Oceania, North America and western and northern Europe via official state websites, bibliographical searches and interviews with international prison health representatives. The means and methods implemented to monitor prisoners' health in the studied countries are heterogeneous. Although all countries systematically record mortality data, only four have a monitoring system that covers a wide array of health data: Canada and Belgium routinely collect health data using a systematic, standardized and computerized approach, while the USA and Australia have developed regular repeated nationwide surveys. Some countries have set up monitoring systems restricted to specific health problems, such as infectious diseases (e.g. the UK, Switzerland and Canada) and mental health (e.g. New Zealand and the Netherlands). In other countries, including France, prisoners' health monitoring systems are limited to occasional epidemiological studies covering specific topics, for example, psychiatric disorders, addiction or infectious diseases. However, their one-off nature prevents regular assessment of health prevalence and trends. This study highlights the diversity of approaches and methods developed to monitor prison health in high-income countries. Analysis of these different situations provides an insight into the feasibility of and requirements for the development of an efficient prison health surveillance system. © The Author 2014. Published by Oxford University Press on behalf of the European Public Health Association. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Oxford University Press* in [European Journal of Public Health, The](#)

**52. Punishing parents: child removal in the context of drug use.**

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- Citation:** Drug and alcohol review, Jan 2015, vol. 34, no. 1, p. 27-30 (January 2015)
- Author(s):** Olsen, Anna
- Abstract:** New amendments to child welfare policy in New South Wales turn a spotlight on parents who use drugs and raise concerns about adequate provision of services for families facing issues with alcohol and other drug use. Sections of the new legislation are explicitly focused on parents who use illicit drugs, expanding the reach of child protection services over expectant parents during pregnancy. This targeting of women who are 'addicted' highlights the ambiguous scientific and moral attention to drug use in pregnancy. It also raises practical questions about the potential for the legislation to increase stigma towards drug use and disproportionately affect vulnerable and disadvantaged families. © 2014 Australasian Professional Society on Alcohol and other Drugs.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Wiley* in [Drug and Alcohol Review](#)

**53. Assessing traumatic experiences in screening for PTSD in substance use disorder patients: What is the gain in addition to PTSD symptoms?**

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- Citation:** Psychiatry research, Mar 2015, vol. 226, no. 1, p. 328-332 (March 30, 2015)
- Author(s):** Kok, Tim; de Haan, Hein; van der Meer, Margreet; Najavits, Lisa; de Jong, Cor
- Abstract:** Traumatic experiences have been linked with substance use disorders (SUD) and may be an important factor in the perpetuation of SUD, even in the absence of posttraumatic stress disorder (PTSD) symptoms. The purpose of the current study was to examine the

relationship between childhood trauma and substance use severity in 192 SUD inpatients. Childhood trauma was assessed using the Traumatic Experiences Checklist (TEC). With variables derived from this measure in addition to PTSD symptoms, two regression models were created with alcohol use or drug use severity as dependent variables. Alcohol severity was explained by PTSD symptoms as well as the age of trauma. Drug severity was explained solely by PTSD symptoms. The clinical value of assessing childhood trauma in determining the addiction severity appears to be limited in comparison with PTSD symptoms. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Psychiatry Research](#)

#### 54. What adolescents enrolled in genomic addiction research want to know about conflicts of interest.

**Citation:** Drug and alcohol dependence, Feb 2015, vol. 147, p. 272-275 (February 1, 2015)  
**Author(s):** Coors, Marilyn E; Raymond, Kristen M; McWilliams, Shannon K; Hopfer, Christian J; Mikulich-Gilbertson, Susan K  
**Abstract:** Perspectives of adolescent research participants regarding conflicts of interest (COIs) and their impact on trust in researchers have not been studied. This study evaluates views of adolescent patients in treatment for substance and conduct problems compared to controls enrolled in genomic addiction research. Participants included 273 (190 patients, 83 controls) adolescents. Participants consented or assented (with parental consent) to have their genomic information deposited in a NIH biobank that shares information globally with qualified investigators. As part of that study, participants completed a COI survey. Endorsement of each COI item was analyzed with multiple logistic regressions, evaluating group, age, sex, ethnicity, and highest grade completed. Patients and controls differed in gender, ethnicity and highest grade completed. In response to the survey, 38.4% of patients and 25.3% of controls "want to know" and 35.3% of patients and 37.3% of controls "might want to know" about COIs. Males were less likely to want/might want disclosure about COIs. Older patients were more likely to want disclosure about financial interests; patients were more likely to want disclosure about possible treatments; males were more likely to want information about monetary gains. Both groups requested between 1 paragraph and 1 page of information. Disclosure of COIs did not impact trust for most participants. Adolescent patients and controls in this study want comparable information for disclosure of COIs including monetary gains, salary, publications, grants, and professional awards. Notably, the majority of patients and controls report that disclosure will not undermine trust in researchers. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 55. Multi-dimensional correlates of Internet addiction symptoms in adolescents with attention-deficit/hyperactivity disorder.

**Citation:** Psychiatry research, Jan 2015, vol. 225, no. 1-2, p. 122-128 (January 30, 2015)  
**Author(s):** Chou, Wen-Jiun; Liu, Tai-Ling; Yang, Pinchen; Yen, Cheng-Fang; Hu, Huei-Fan  
**Abstract:** This study examined the associations of the severity of Internet addiction symptoms with reinforcement sensitivity, family factors, Internet activities, and attention-deficit/hyperactivity disorder (ADHD) symptoms among adolescents in Taiwan diagnosed with ADHD. A total of 287 adolescents diagnosed with ADHD and aged between 11 and 18 years participated in this study. Their levels of Internet addiction symptoms, ADHD symptoms, reinforcement sensitivity, family factors, and various Internet activities in which the participants engaged were assessed. The correlates of the severities of Internet addiction symptoms were determined using multiple regression



analyses. The results indicated that low satisfaction with family relationships was the strongest factor predicting severe Internet addiction symptoms, followed by using instant messaging, watching movies, high Behavioral Approach System (BAS) fun seeking, and high Behavioral Inhibition System scores. Meanwhile, low paternal occupational SES, low BAS drive, and online gaming were also significantly associated with severe Internet addiction symptoms. Multiple factors are significantly associated with the severity of Internet addiction symptoms among adolescents with ADHD. Clinicians, educational professionals, and parents of adolescents with ADHD should monitor the Internet use of adolescents who exhibit the factors identified in this study. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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

#### 56. Long-term outcomes from the National Drug Abuse Treatment Clinical Trials Network Prescription Opioid Addiction Treatment Study.

**Citation:** Drug and alcohol dependence, May 2015, vol. 150, p. 112-119 (May 1, 2015)  
**Author(s):** Weiss, Roger D; Potter, Jennifer Sharpe; Griffin, Margaret L; Provost, Scott E; Fitzmaurice, Garrett M; McDermott, Katherine A; Srisarajivakul, Emily N; Dodd, Dorian R; Dreifuss, Jessica A; McHugh, R Kathryn; Carroll, Kathleen M  
**Abstract:** Despite the growing prevalence of prescription opioid dependence, longitudinal studies have not examined long-term treatment response. The current study examined outcomes over 42 months in the Prescription Opioid Addiction Treatment Study (POATS). POATS was a multi-site clinical trial lasting up to 9 months, examining different durations of buprenorphine-naloxone plus standard medical management for prescription opioid dependence, with participants randomized to receive or not receive additional opioid drug counseling. A subset of participants (N=375 of 653) enrolled in a follow-up study. Telephone interviews were administered approximately 18, 30, and 42 months after main-trial enrollment. Comparison of baseline characteristics by follow-up participation suggested few differences. At Month 42, much improvement was seen: 31.7% were abstinent from opioids and not on agonist therapy; 29.4% were receiving opioid agonist therapy, but met no symptom criteria for current opioid dependence; 7.5% were using illicit opioids while on agonist therapy; and the remaining 31.4% were using opioids without agonist therapy. Participants reporting a lifetime history of heroin use at baseline were more likely to meet DSM-IV criteria for opioid dependence at Month 42 (OR=4.56, 95% CI=1.29-16.04, p

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 57. The effects of piracetam on heroin-induced CPP and neuronal apoptosis in rats.

**Citation:** Drug and alcohol dependence, May 2015, vol. 150, p. 141-146 (May 1, 2015)  
**Author(s):** Xu, Peng; Li, Min; Bai, Yanping; Lu, Wei; Ling, Xiaomei; Li, Weidong  
**Abstract:** Piracetam is a positive allosteric modulator of the AMPA receptor that has been used in the treatment of cognitive disorders for decades. Recent surveys and drug analyses have demonstrated that a heroin mixture adulterated with piracetam has spread rapidly in heroin addicts in China, but its addictive properties and the damage it causes to the central neural system are currently unknown. The effect of piracetam on the reward properties of heroin was assessed by conditioned place preference (CPP). Electron microscopy and radioimmunoassay were used to compare the effects of heroin mixed with equivalent piracetam (HP) and heroin alone on neuronal apoptosis and the levels of beta-endorphin ( $\beta$ -EP) in different brain subregions within the corticolimbic system, respectively. Piracetam significantly enhanced heroin-induced CPP expression while piracetam itself didn't induce CPP. Morphological observations showed that HP-treated rats had less

neuronal apoptosis than heroin-treated group. Interestingly, HP normalized the levels of  $\beta$ -EP in the medial prefrontal cortex (mPFC) and core of the nucleus accumbens (AcbC) subregions, in where heroin-treated rats showed decreased levels of  $\beta$ -EP. These results indicate that piracetam potentiate the heroin-induced CPP and protect neurons from heroin-induced apoptosis. The protective role of HP might be related to the restoration of  $\beta$ -EP levels by piracetam. Our findings may provide a potential interpretation for the growing trend of HP abuse in addicts in China. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 58. Should pathological gambling and obesity be considered addictive disorders? A factor analytic study in a nationally representative sample.

**Citation:** Drug and alcohol dependence, May 2015, vol. 150, p. 129-134 (May 1, 2015)  
**Author(s):** Blanco, Carlos; García-Anaya, María; Wall, Melanie; de Los Cobos, José Carlos Pérez; Swierad, Ewelina; Wang, Shuai; Petry, Nancy M  
**Abstract:** Pathological gambling (PG) is now aligned with substance use disorders in the DSM-5 as the first officially recognized behavioral addiction. There is growing interest in examining obesity as an addictive disorder as well. The goal of this study was to investigate whether epidemiological data provide support for the consideration of PG and obesity as addictive disorders. Factor analysis of data from a large, nationally representative sample of US adults (N=43,093), using nicotine dependence, alcohol dependence, drug dependence, PG and obesity as indicators. It was hypothesized that nicotine dependence, alcohol dependence and drug use dependence would load on a single factor. It was further hypothesized that if PG and obesity were addictive disorders, they would load on the same factor as substance use disorders, whereas failure to load on the addictive factor would not support their conceptualization as addictive disorders. A model with one factor including nicotine dependence, alcohol dependence, drug dependence and PG, but not obesity, provided a very good fit to the data, as indicated by CFI=0.99, TLI=0.99 and RMSEA=0.01 and loadings of all indicators >0.4. Data from this study support the inclusion of PG in a latent factor with substance use disorders but do not lend support to the consideration of obesity, as defined by BMI, as an addictive disorder. Future research should investigate whether certain subtypes of obesity are best conceptualized as addictive disorders and the shared biological and environmental factors that account for the common and specific features of addictive disorders. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 59. Ex vivo effects of ibogaine on the activity of antioxidative enzymes in human erythrocytes.

**Citation:** Journal of ethnopharmacology, Apr 2015, vol. 164, p. 64-70 (April 22, 2015)  
**Author(s):** Nikolić-Kokić, Aleksandra; Oreščanin-Dušić, Zorana; Spasojević, Ivan; Slavić, Marija; Mijušković, Ana; Paškulin, Roman; Miljević, Čedo; Spasić, Mihajlo B; Blagojević, Duško P  
**Abstract:** Ibogaine is a naturally occurring alkaloid with psychotropic and metabotropic effects, derived from the bark of the root of the West African *Tabernanthe iboga* plant. The tribes of Kongo basin have been using *iboga* as a stimulant, for medicinal purposes, and in rite of passage ceremonies, for centuries. Besides, it has been found that this drug has anti-addictive effects. Previous studies have demonstrated that ibogaine changed the quantity of ATP and energy related enzymes as well as the activity of antioxidant enzymes in cells thus altering redox equilibrium in a time manner. In this work, the mechanism of its action was further studied by measuring the effects of ibogaine in

human erythrocytes in vitro on ATP liberation, membrane fluidity and antioxidant enzymes activity. Heparinized human blood samples were incubated with ibogaine (10 and 20 $\mu$ M) at 37°C for 1h. Blood plasma was separated by centrifugation and the levels of ATP and uric acid were measured 10min after the addition of ibogaine using standard kits. The activity of copper-zinc superoxide dismutase (SOD1), catalase (CAT), glutathione peroxidase (GSH-Px) and glutathione reductase (GR) were measured in erythrocytes after incubation period. The stability of SOD1 activity was further tested through in vitro incubation with H<sub>2</sub>O<sub>2</sub> and scanning of its electrophoretic profiles. Membrane fluidity was determined using an electron paramagnetic resonance spin-labelling method. Results showed that ibogaine treatment of erythrocytes in vitro increased ATP concentration in the blood plasma without changes in neither erythrocytes membrane fluidity nor uric acid concentration. Ibogaine also increased SOD1 activity in erythrocytes at both doses applied here. Treatment with 20 $\mu$ M also elevated GR activity after in vitro incubation at 37°C. Electrophoretic profiles revealed that incubation with ibogaine mitigates H<sub>2</sub>O<sub>2</sub> mediated suppression of SOD1 activity. Some of the effects of ibogaine seem to be mediated through its influence on energy metabolism, redox active processes and the effects of discrete fluctuations of individual reactive oxygen species on different levels of enzyme activities. Overall, ibogaine acts as a pro-antioxidant by increasing activity of antioxidative enzymes and as an adaptogene in oxidative distress. Copyright © 2015. Published by Elsevier Ireland Ltd.

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**Source:** Medline

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

#### 60. Investigating the microstructural and neurochemical environment within the basal ganglia of current methamphetamine abusers.

**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 122-127 (April 1, 2015)

**Author(s):** Lin, Joanne C; Jan, Reem K; Kydd, Rob R; Russell, Bruce R

**Abstract:** Methamphetamine is a highly addictive psychostimulant and the medical, social, and economic consequences associated with its use have become a major international problem. Current evidence has shown methamphetamine to be particularly neurotoxic to dopamine neurons and striatal structures within the basal ganglia. A previous study from our laboratory demonstrated larger putamen volumes in actively using methamphetamine-dependent participants. The purpose of this current study was to determine whether striatal structures in the same sample of participants also exhibit pathology on the microstructural and molecular level. Diffusion tensor imaging (DTI) and magnetic resonance spectroscopy (MRS) were carried out in current methamphetamine users (n=18) and healthy controls (n=22) to investigate diffusion indices and neurometabolite levels in the basal ganglia. Contrary to findings from previous DTI and MRS studies, no significant differences in diffusion indices or metabolite levels were observed in the basal ganglia regions of current methamphetamine users. These findings differ from those reported in abstinent users and the absence of diffusion and neurochemical abnormalities may suggest that striatal enlargement in current methamphetamine use may be due to mechanisms other than edema and glial proliferation. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 61. Escalation of cocaine consumption in short and long access self-administration procedures.

**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 166-172 (April 1, 2015)

**Author(s):** Mandt, Bruce H; Copenhagen, Leland I; Zahniser, Nancy R; Allen, Richard M

**Abstract:** Escalation of consumption is a hallmark of cocaine addiction. Many animal models reveal escalation by increasing the duration of drug access (e.g., 6-24h/day) after longer histories of self-administration. We recently developed a method that reveals escalation early post-acquisition under shorter access conditions. However, whether or not rats will escalate cocaine consumption both early post-acquisition under short access (2h/day) conditions, and later under long access (6h/day) conditions, has not been demonstrated. All rats acquired cocaine self-administration (0.8mg/kg, i.v.) under 2h conditions, and then continued 2h self-administration for an additional 13 sessions. Then, rats were assigned either to 2 or 6h conditions, and self-administered cocaine (0.8mg/kg, i.v.) for an additional 19 sessions. In addition, four cocaine-induced locomotor activity measurements were taken for each rat: before cocaine exposure, after non-contingent cocaine administration, and after escalation in the short and long access experimental phases. Following acquisition, rats displayed a robust escalation of intake during 2h sessions. Rats that self-administered cocaine in continued 2h sessions exhibited stable intake, whereas rats that self-administered cocaine in 6h sessions further escalated intake. Despite the second escalation in 6h rats, cocaine-induced locomotor activity did not differ between 2 and 6h rats. Escalation of cocaine self-administration can occur in the same rats both early post-acquisition, and later under long access conditions. Importantly, this early post-acquisition period provides a new opportunity to determine the mechanisms first involved in the escalation phenomenon. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

## 62. Trends in abuse and misuse of prescription opioids among older adults.

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**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 117-121 (April 1, 2015)

**Author(s):** West, Nancy A; Severtson, Stevan G; Green, Jody L; Dart, Richard C

**Abstract:** Dramatic increases in the prescriptive use of opioid analgesics during the past two decades have been paralleled by alarming increases in rates of the abuse and intentional misuse of these drugs. We examined recent trends in the abuse and misuse and associated fatal outcomes among older adults (60+ years) and compared these to trends among younger adults (20-59 years). Trend analysis using linear regression models was used to analyze 184,136 cases and 1149 deaths associated with abuse and misuse of the prescription opioids oxycodone, fentanyl, hydrocodone, morphine, oxycodone, hydromorphone, methadone, buprenorphine, tramadol, and tapentadol that were reported to participating U.S. Poison Centers of the Researched Abuse, Diversion and Addiction-Related Surveillance (RADARS(®)) System between 2006-Q1 and 2013-Q4. Rates of abuse and misuse of prescription opioids were lower for older adults than for younger adults; however, mortality rates among the older ages followed an increasing linear trend (P

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

## 63. Quetiapine for the treatment of cocaine use disorder.

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**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 18-24 (April 1, 2015)

**Author(s):** Tapp, Andre; Wood, Amanda Ernst; Kennedy, Annette; Sylvers, Patrick; Kilzieh, Nael; Saxon, Andrew J

**Abstract:** Cocaine addiction continues to be a significant healthcare issue, yet there are no FDA approved medications for the treatment of cocaine use disorder within the United States. This 12-week, prospective, double-blind, randomized, placebo-controlled study examined the effectiveness of quetiapine (Seroquel XR™) versus matched placebo for the treatment of DSM-IV cocaine dependence in non-psychotic individuals. Subjects

randomized to quetiapine (N=29) were titrated up to a target dose of 400mg/day of quetiapine, while those in the placebo arm (N=31) were given a matched placebo. All subjects had weekly clinic visits and a cognitive-behavioral therapy group session. Outcome measures included self-report of cocaine use and money spent on cocaine as well as urine drug screens (UDS). The drop-out rate was substantial at 68%. Logistic regression analysis did not find significant differences between groups in predicting end-of trial abstinence, defined as three consecutive weekly negative UDS (13.7% in the quetiapine group versus 12.9% in the placebo group;  $p=.92$ ). Based upon a repeated measures analysis of variance, subjects in this study, as a whole, demonstrated reductions in their self-reported use of cocaine, self-reported money spent on cocaine, and number of days per week using cocaine. However, the quetiapine group did not differ significantly from the placebo group. This study did not find group differences between the quetiapine and placebo arms, suggesting that quetiapine is not an efficacious treatment for DSM-IV cocaine dependence. Published by Elsevier Ireland Ltd.

**Subject Headings:** [Index Medicus](#)  
**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 64. Within-prison drug injection among HIV-infected male prisoners in Indonesia: A highly constrained choice.

**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 71-79 (April 1, 2015)  
**Author(s):** Culbert, Gabriel J; Waluyo, Agung; Iriyanti, Mariska; Muchransyah, Azalia P; Kamarulzaman, Adeeba; Altice, Frederick L  
**Abstract:** In Indonesia, incarceration of people who inject drugs (PWID) and access to drugs in prison potentiate within-prison drug injection (WP-DI), a preventable and extremely high-risk behavior that may contribute substantially to HIV transmission in prison and communities to which prisoners are released. This mixed method study examined the prevalence, correlates, and social context of WP-DI among HIV-infected male prisoners in Indonesia. 102 randomly selected HIV-infected male prisoners completed semi-structured voice-recorded interviews about drug use changes after arrest, drug use cues within prison, and impact of WP-DI on HIV and addiction treatment. Logistic regression identified multivariate correlates of WP-DI and thematic analysis of interview transcripts used grounded-theory. Over half (56%) of participants reported previous WP-DI. Of those, 93% shared injection equipment in prison, and 78.6% estimated sharing needles with  $\geq 10$  other prisoners. Multivariate analyses independently correlated WP-DI with being incarcerated for drug offenses (AOR=3.29, 95%CI=1.30-8.31,  $p=0.011$ ) and daily drug injection before arrest (AOR=5.23, 95%CI=1.42-19.25,  $p=0.013$ ). Drug availability and proximity to drug users while incarcerated were associated with frequent drug craving and escalating drug use risk behaviors after arrest. Energetic heroin marketing and stigmatizing attitudes toward methadone contribute to WP-DI and impede addiction and HIV treatment. Frequent WP-DI and needle sharing among these HIV-infected Indonesian prison inmates indicate the need for structural interventions that reduce overcrowding, drug supply, and needle sharing, and improve detection and treatment of substance use disorders upon incarceration to minimize WP-DI and associated harm. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 65. Predicting use of assistance when quitting: A longitudinal study of the role of quitting beliefs.

**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 220-224 (April 1, 2015)  
**Author(s):** Myers, Mark G; Strong, David R; Linke, Sarah E; Hofstetter, C Richard; Al-Delaimy, Wael K  
**Abstract:** A growing literature addresses the need to reduce cigarette smoking prevalence by increasing the use of assistance when quitting. A key focus is to identify strategies for

enhancing adoption of effective interventions in order to increase utilization of evidence-based treatments. To examine the effect of beliefs regarding ability to quit on utilization of assistance for smoking cessation. A mediation model was hypothesized whereby the relationship between smoking and use of assistance is influenced by beliefs in ability to quit. The present study includes 474 of 1000 respondents to baseline and follow-up California Smokers Cohort surveys conducted from 2011 to 2013. Included were baseline smokers who reported a 24-h quit attempt at follow-up. Baseline variables were used to predict use of assistance when quitting. The hypothesized model was tested using a product of coefficients method, controlling for demographics. Greater heaviness of smoking and lower belief in ability to quit were significantly related to use of assistance. Quitting beliefs significantly mediated the relationship between nicotine dependence and use of assistance. The present data support a mechanism whereby the effect of smoking rate on treatment utilization is mediated by beliefs in ability to quit. Greater belief in one's ability to quit may represent an obstacle to treatment utilization by reducing the likelihood of successful cessation. The present findings suggest the value of targeted messages from health care providers that normalize the need for assistance when attempting to change an addictive behavior and emphasize the difficulty of quitting without assistance. Published by Elsevier Ireland Ltd.

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**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 66. Influence of dorsolateral prefrontal cortex and ventral striatum on risk avoidance in addiction: A mediation analysis.

**Citation:** Drug and alcohol dependence, Apr 2015, vol. 149, p. 10-17 (April 1, 2015)  
**Author(s):** Yamamoto, Dorothy J; Woo, Choong-Wan; Wager, Tor D; Regner, Michael F; Tanabe, Jody  
**Abstract:** Alterations in frontal and striatal function are hypothesized to underlie risky decision making in drug users, but how these regions interact to affect behavior is incompletely understood. We used mediation analysis to investigate how prefrontal cortex and ventral striatum together influence risk avoidance in abstinent drug users. Thirty-seven abstinent substance-dependent individuals (SDI) and 43 controls underwent fMRI while performing a decision-making task involving risk and reward. Analyses of a priori regions-of-interest tested whether activity in dorsolateral prefrontal cortex (DLPFC) and ventral striatum (VST) explained group differences in risk avoidance. Whole-brain analysis was conducted to identify brain regions influencing the negative VST-risk avoidance relationship. Right DLPFC (RDLPFC) positively mediated the group-risk avoidance relationship (p

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**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 67. Prenatal stress alters sensitivity to benzodiazepines in adult rats.

**Citation:** Neuroscience letters, Mar 2015, vol. 591, p. 187-191 (March 30, 2015)  
**Author(s):** Lakehayli, S; Said, N; Battas, O; Hakkou, F; Tazi, A  
**Abstract:** In rats, prenatal stress (PS) induces persistent changes in the brain that eventually can be translated in altered behavior leading to a greater consumption of psychostimulants in the offspring during adulthood. Though many studies have been carried on the effects of PS on stimulant drug responsiveness, little is known about susceptibility to benzodiazepines dependence in this animal model. We hereby examined the long-lasting impact of PS exposure during the last 10 days of pregnancy on the vulnerability to benzodiazepine addiction in adult rats. In addition, we also investigated the link between PS and the sensitivity to anxiolytics. Our results reveal that PS offspring exhibited a significantly greater preference to the diazepam-paired side than control offspring in the conditioned

place preference. Importantly, we found that PS enhanced the anxiolytic effects of diazepam in the elevated plus maze paradigm. This work demonstrates that PS increased the abuse potential of benzodiazepines and the sensitivity to anxiolytic drugs in offspring of stressed mothers. Thus, investigating the interactions among addiction and PS may contribute to a better understanding how early life events modify neural circuitry and thereby behavior. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

**Subject Headings:** [Index Medicus](#)

**Source:** Medline

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

#### 68. Hypothalamic-pituitary-adrenal axis activity in patients with pathological gambling and internet use disorder.

**Citation:** Psychiatry research, Mar 2015, vol. 226, no. 1, p. 97-102 (March 30, 2015)

**Author(s):** Geisel, Olga; Panneck, Patricia; Hellweg, Rainer; Wiedemann, Klaus; Müller, Christian A

**Abstract:** Alterations in secretion of stress hormones within the hypothalamic-pituitary-adrenal (HPA) axis have repeatedly been found in substance-related addictive disorders. It has been suggested that glucocorticoids might contribute to the development and maintenance of substance use disorders by facilitatory effects on behavioral responses to substances of abuse. The objective of this pilot study was to investigate HPA axis activity in patients with non-substance-related addictive disorders, i.e. pathological gambling and internet use disorder. We measured plasma levels of copeptin, a vasopressin surrogate marker, adrenocorticotrophic hormone (ACTH) and cortisol in male patients with pathological gambling (n=14), internet use disorder (n=11) and matched healthy controls for pathological gambling (n=13) and internet use disorder (n=10). Plasma levels of copeptin, ACTH and cortisol in patients with pathological gambling or internet use disorder did not differ among groups. However, cortisol plasma levels correlated negatively with the severity of pathological gambling as measured by the PG-YBOCS. Together with our findings of increased serum levels of brain-derived neurotrophic factor (BDNF) in pathological gambling but not internet use disorder, these results suggest that the pathophysiology of pathological gambling shares some characteristics with substance-related addictive disorders on a neuroendocrinological level, whereas those similarities could not be observed in internet use disorder. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline

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#### 69. The relationship of DSM-IV pathological gambling to compulsive buying and other possible spectrum disorders: Results from the Iowa PG family study.

**Citation:** Psychiatry research, Mar 2015, vol. 226, no. 1, p. 273-276 (March 30, 2015)

**Author(s):** Black, Donald W; Coryell, William; Crowe, Raymond; Shaw, Martha; McCormick, Brett; Allen, Jeff

**Abstract:** This study investigates the possible relationship between pathological gambling (PG) and potential spectrum disorders including the DSM-IV impulse control disorders (intermittent explosive disorder, kleptomania, pyromania, trichotillomania) and several non-DSM disorders (compulsive buying disorder, compulsive sexual behavior, Internet addiction). PG probands, controls, and their first-degree relatives were assessed with instruments of known reliability. Detailed family history information was collected on relatives who were deceased or unavailable. Best estimate diagnoses were assigned blind to family status. The results were analyzed using logistic regression by the method of generalized estimating equations. The sample included 95 probands with PG, 91 controls, and 1075 first-degree relatives (537 PG, 538 controls). Compulsive buying disorder and having "any spectrum disorder" were more frequent in the PG probands and their first-degree relatives vs. controls and their relatives. Spectrum disorders were

significantly more prevalent among PG relatives compared to control relatives (adjusted OR=8.37), though much of this difference was attributable to the contribution from compulsive buying disorder. We conclude that compulsive buying disorder is likely part of familial PG spectrum. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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

#### 70. [(3)H]Ifenprodil binding in post-mortem brains of Cloninger type 1 and 2 alcoholics: A whole-hemisphere autoradiography study.

**Citation:** Psychiatry research, Mar 2015, vol. 231, no. 3, p. 197-201 (March 30, 2015)  
**Author(s):** Kupila, Jukka; Kärkkäinen, Olli; Laukkanen, Virpi; Häkkinen, Merja; Kautiainen, Hannu; Tiihonen, Jari; Storvik, Markus  
**Abstract:** The glutamate N-methyl-d-aspartate (NMDA) receptor NR2B subunits are sensitive to ethanol and are found in brain areas related to ethanol addiction, dependence, development of alcohol tolerance, and alcohol withdrawal syndrome. Previous studies indicate that early-onset Cloninger type 2 alcoholics have an intact, responsive, dopaminergic system in the nucleus accumbens (NAC), whereas type 1 alcoholics have dopaminergic defects. NR2B-containing NMDA receptors in the NAC are involved in both non-opioid and opioid receptor-mediated reward. Our aim was to evaluate the putative [(3)H]ifenprodil binding alterations of NR2B receptors in limbic, hippocampal, and cortical brain areas of type 1 alcoholics (n=8), type 2 alcoholics (n=8), and control subjects (n=10) by postmortem whole hemisphere autoradiography. We found significantly different binding levels among these three subject groups, and the main difference was localized in the decreased binding in type 2 alcoholics and controls in the nucleus accumbens. Although preliminary and from relatively small diagnostic groups, these results suggest pathological alterations in the NR2B-mediated reward system of type 2 alcoholics. Copyright © 2015. Published by Elsevier Ireland Ltd.

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

#### 71. Inflammatory response in heroin addicts undergoing methadone maintenance treatment.

**Citation:** Psychiatry research, Mar 2015, vol. 226, no. 1, p. 230-234 (March 30, 2015)  
**Author(s):** Chan, Yuan-Yu; Yang, Szu-Nian; Lin, Jyh-Chyang; Chang, Junn-Liang; Lin, Jaung-Geng; Lo, Wan-Yu  
**Abstract:** Opioid addiction influences many physiological functions including reactions of the immune system. The objective of this study was to investigate the immune system function in heroin addicted patients undergoing methadone maintenance treatment (MMT) compared to healthy controls. We tested the cytokine production of IL-1 $\beta$ , IL-6, IL-8, IL-10 and tumor necrosis factor (TNF)- $\alpha$  from a group of heroin addicts (n=34) and healthy controls (n=20). The results show that production of IL-1 $\beta$ , IL-6 and IL-8 was significantly higher in the group of methadone-maintained patients than in the healthy control group. Plasma TNF- $\alpha$  and IL-6 levels were significantly correlated with the daily methadone dosage administered, and the IL-1 $\beta$  level was significantly correlated with the duration of methadone maintenance treatment. These findings suggest that methadone maintenance treatment influences the immune system functions of opioid-dependent patients and may also induce long-term systemic inflammation. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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



### 72. The association between heroin expenditure and dopamine transporter availability-A single-photon emission computed tomography study.

- Citation:** Psychiatry research, Mar 2015, vol. 231, no. 3, p. 292-297 (March 30, 2015)
- Author(s):** Lin, Shih-Hsien; Chen, Kao Chin; Lee, Sheng-Yu; Chiu, Nan Tsing; Lee, I Hui; Chen, Po See; Yeh, Tzung Lih; Lu, Ru-Band; Chen, Chia-Chieh; Liao, Mei-Hsiu; Yang, Yen Kuang
- Abstract:** One of the consequences of heroin dependency is a huge expenditure on drugs. This underlying economic expense may be a grave burden for heroin users and may lead to criminal behavior, which is a huge cost to society. The neuropsychological mechanism related to heroin purchase remains unclear. Based on recent findings and the established dopamine hypothesis of addiction, we speculated that expenditure on heroin and central dopamine activity may be associated. A total of 21 heroin users were enrolled in this study. The annual expenditure on heroin was assessed, and the availability of the dopamine transporter (DAT) was assessed by single-photon emission computed tomography (SPECT) using [(99m)TC]TRODAT-1. Parametric and nonparametric correlation analyses indicated that annual expenditure on heroin was significantly and negatively correlated with the availability of striatal DAT. After adjustment for potential confounders, the predictive power of DAT availability was significant. Striatal dopamine function may be associated with opioid purchasing behavior among heroin users, and the cycle of spiraling dysfunction in the dopamine reward system could play a role in this association. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Psychiatry Research](#)

### 73. Co-occurrence of alcohol use disorder and behavioral addictions: relevance of impulsivity and craving.

- Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 118-125 (March 1, 2015)
- Author(s):** Di Nicola, Marco; Tedeschi, Daniela; De Risio, Luisa; Pettorruso, Mauro; Martinotti, Giovanni; Ruggeri, Filippo; Swierkosz-Lenart, Kevin; Guglielmo, Riccardo; Callea, Antonino; Ruggeri, Giuseppe; Pozzi, Gino; Di Giannantonio, Massimo; Janiri, Luigi
- Abstract:** The aims of the study were to evaluate the occurrence of behavioral addictions (BAs) in alcohol use disorder (AUD) subjects and to investigate the role of impulsivity, personality dimensions and craving. 95 AUD outpatients (DSM-5) and 140 homogeneous controls were assessed with diagnostic criteria and specific tests for gambling disorder, compulsive buying, sexual, internet and physical exercise addictions, as well as with the Barratt Impulsiveness Scale (BIS-11) and Temperamental and Character Inventory-Revised (TCI-R). The Obsessive Compulsive Drinking Scale (OCDS) and Visual Analogue Scale for craving (VASc) were also administered to the AUD sample. 28.4% (n=27) of AUD subjects had at least one BA, as compared to 15% (n=21) of controls ( $\chi^2=6.27$ ;  $p=.014$ ). In AUD subjects, direct correlations between BIS-11 and Compulsive Buying Scale (CBS), Internet Addiction Disorder test (IAD), Exercise Addiction Inventory-Short Form (EAI-SF) scores (p
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

### 74. Challenges to implementing opioid substitution therapy in Ukrainian prisons: Personnel attitudes toward addiction, treatment, and people with HIV/AIDS.

- Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 47-55 (March 1, 2015)
- Author(s):** Polonsky, Maxim; Azbel, Lyuba; Wickersham, Jeffrey A; Taxman, Faye S; Grishaev, Evgeny; Dvoryak, Sergey; Altice, Frederick L

**Abstract:** Ukraine is experiencing one of the most volatile HIV epidemics globally, fueled primarily by people who inject drugs (PWIDs), and a parallel incarceration epidemic. Opioid substitution therapy (OST) is internationally recognized as one of the most effective forms of treatment for opioid dependence and is among the most effective HIV prevention strategies available, yet efforts to adopt it in Ukraine's Criminal Justice System (CJS) have been thwarted. To understand the reluctance of the Ukrainian CJS to adopt OST despite the overwhelming evidence pointing to its health benefits and improved criminal justice outcomes, we conducted the first survey of Ukrainian prison administrative, medical and custodial staff (N=243) attitudes towards addiction in general, OST, and people living with HIV/AIDS (PLWHA) in representative regions of Ukraine. Results revealed that Ukrainian CJS workers' attitudes toward OST, PLWHA, and drug addiction were universally negative, but differed substantially along geographic and occupational lines. Whereas geographic and cultural proximity to the European Union drove positive attitudes in the west, in the southern region we observed an identifiability effect, as workers who worked directly with prisoners held the most positive attitudes. We also found that knowledge mediated the effect of drug intolerance on OST attitudes. In Ukraine, adoption of OST is more influenced by myths, biases and ideological prejudices than by existing scientific evidence. By elucidating existing attitudes among CJS personnel, this study will help to direct subsequent interventions to address the barriers to implementing evidence-based HIV prevention treatments. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### 75. Ecological momentary assessment in the investigation of craving and substance use in daily life: a systematic review.

**Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 1-20 (March 1, 2015)

**Author(s):** Serre, Fuschia; Fatseas, Melina; Swendsen, Joel; Auriacombe, Marc

**Abstract:** Craving is viewed as a major determinant of relapse in persons with substance addiction, but this association remains poorly understood due to its time-limited nature and the biases associated with retrospective reporting. Ecological momentary assessment (EMA) offers new opportunities to examine both craving and substance use with strong ecological validity by collecting real-time data in daily life. This review examined all published studies using EMA to: (1) assess the link between craving and substance use; and (2) identify relevant moderators of craving among substance users. We searched PubMed and PsycInfo databases up to October 31, 2013. Ninety-one studies were selected, involving mostly tobacco smokers (73%). A majority of studies (92%) reported a positive relationship between craving and substance use, concurrently and prospectively, and among users with different levels of use for both legal and illegal substances. Results suggest that craving is a stronger predictor of relapse episodes when assessed in close temporal proximity to substance use. EMA data also confirmed the influence of diverse within-person and between-person sources of variation in daily life craving reports. This review provides strong support for the link between craving and substance use, and underscores the importance of the timing of assessments. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 76. Exploration of the telescoping effect among not-in-treatment, intensive heroin-using research volunteers.

**Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 217-220 (March 1, 2015)

**Author(s):** Stoltman, Jonathan J K; Woodcock, Eric A; Lister, Jamey J; Greenwald, Mark K; Lundahl, Leslie H

**Abstract:** Addiction research literature suggests some demographic groups exhibit a later age of substance use initiation, more rapid escalation to dependence, and worse substance use-related outcomes. This 'telescoping' effect has been observed more often in females but has not yet been examined in not-in-treatment heroin users or racial subgroups. Not-in-treatment, intensive heroin-using adults screened for laboratory-based research studies (N=554; range 18-55 yr; mean age: 42.5 yr; 60.5% African American [AA]; 70.2% male) were included in this secondary analysis. A comprehensive drug history questionnaire assessed heroin-use characteristics and lifetime adverse consequences. We examined telescoping effects by racial and gender groups: Caucasian males and females; AA males and females. Caucasian males initiated heroin use significantly later than AA males but this difference was not observed for age at intensive heroin use ( $\geq 3$  times weekly). Caucasian males reported significantly more lifetime heroin use-related consequences, were more likely to inject heroin, and reported more-frequent past-month heroin use, but did not differ from AA males in lifetime heroin quit attempts or prior heroin treatment. Females, compared to males, reported later onset of initial and intensive use, but there was no gender-telescoping effect from initial to intensive heroin-use. In this not-in-treatment sample, Caucasian males exhibited more rapid heroin-use progression and adverse consequences than AA males, i.e., within-gender, racial-group telescoping. Despite later-onset heroin use among females, there was no evidence of gender-related telescoping. Given the resurgence of heroin use, differential heroin-use trajectories across demographic groups may be helpful in planning interventions. Copyright © 2015. Published by Elsevier Ireland Ltd.

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**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 77. Fatal poisoning in drug addicts in the Nordic countries in 2012.

**Citation:** Forensic science international, Mar 2015, vol. 248, p. 172-180 (March 2015)

**Author(s):** Simonsen, K Wiese; Edvardsen, H M E; Thelander, G; Ojanperä, I; Thordardottir, S; Andersen, L V; Kriikku, P; Vindenes, V; Christoffersen, D; Delaveris, G J M; Frost, J

**Abstract:** This report is a follow-up to a study on fatal poisoning in drug addicts conducted in 2012 by a Nordic working group. Here we analyse data from the five Nordic countries: Denmark, Finland, Iceland, Norway and Sweden. Data on sex, number of deaths, places of death, age, main intoxicants and other drugs detected in the blood were recorded. National data are presented and compared between the Nordic countries and with data from similar studies conducted in 1991, 1997, 2002 and 2007. The death rates (number of deaths per 100,000 inhabitants) increased in drug addicts in Finland, Iceland and Sweden but decreased in Norway compared to the rates in earlier studies. The death rate was stable in Denmark from 1991 to 2012. The death rate remained highest in Norway (5.79) followed by Denmark (5.19) and Iceland (5.16). The differences between the countries diminished compared to earlier studies, with death rates in Finland (4.61) and Sweden (4.17) approaching the levels in the other countries. Women accounted for 15-27% of the fatal poisonings. The median age of the deceased drug addicts was still highest in Denmark, and deaths of addicts >45 years old increased in all countries. Opioids remained the main cause of death, but medicinal opioids like methadone, buprenorphine, fentanyl and tramadol mainly replaced heroin. Methadone was the main intoxicant in Denmark and Sweden, whereas heroin/morphine caused the most deaths in Norway. Finland differed from the other Nordic countries in that buprenorphine was the main intoxicant with only a few heroin/morphine and methadone deaths. Deaths from methadone, buprenorphine and fentanyl increased immensely in Sweden compared to 2007. Poly-drug use was widespread in all countries. The median number of drugs per case varied from 4 to 5. Heroin/morphine, medicinal opioids, cocaine, amphetamines, benzodiazepines and alcohol were the main abused drugs. However, less widely used drugs, like gamma-hydroxybutyric acid (GHB), methylphenidate, fentanyl and pregabalin, appeared in all countries. New psychotropic substances emerged in all countries, with the largest selection, including MDPV, alpha-PVP and 5-IT, seen in Finland and Sweden. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Forensic Science International](#)

#### 78. Evaluation of poly-drug use in methadone-related fatalities using segmental hair analysis.

**Citation:** Forensic science international, Mar 2015, vol. 248, p. 134-139 (March 2015)  
**Author(s):** Nielsen, Marie Katrine Klose; Johansen, Sys Stybe; Linnet, Kristian  
**Abstract:** In Denmark, fatal poisoning among drug addicts is often related to methadone. The primary mechanism contributing to fatal methadone overdose is respiratory depression. Concurrent use of other central nervous system (CNS) depressants is suggested to heighten the potential for fatal methadone toxicity. Reduced tolerance due to a short-time abstinence period is also proposed to determine a risk for fatal overdose. The primary aims of this study were to investigate if concurrent use of CNS depressants or reduced tolerance were significant risk factors in methadone-related fatalities using segmental hair analysis. The study included 99 methadone-related fatalities collected in Denmark from 2008 to 2011, where both blood and hair were available. The cases were divided into three subgroups based on the cause of death; methadone poisoning (N=64), poly-drug poisoning (N=28) or methadone poisoning combined with fatal diseases (N=7). No significant differences between methadone concentrations in the subgroups were obtained in both blood and hair. The methadone blood concentrations were highly variable (0.015-5.3, median: 0.52mg/kg) and mainly within the concentration range detected in living methadone users. In hair, methadone was detected in 97 fatalities with concentrations ranging from 0.061 to 211ng/mg (median: 11ng/mg). In the remaining two cases, methadone was detected in blood but absent in hair specimens, suggesting that these two subjects were methadone-naive users. Extensive poly-drug use was observed in all three subgroups, both recently and within the last months prior to death. Especially, concurrent use of multiple benzodiazepines was prevalent among the deceased followed by the abuse of morphine, codeine, amphetamine, cannabis, cocaine and ethanol. By including quantitative segmental hair analysis, additional information on poly-drug use was obtained. Especially, 6-acetylmorphine was detected more frequently in hair specimens, indicating that regular abuse of heroin was common among the deceased. In conclusion, continuous exposure of methadone provide by segmental hair analysis suggested that reduced tolerance of methadone was not a critical factor among methadone-related fatalities. In contrast, a high abundance of co-ingested CNS depressants suggested that adverse effects from drug-drug interactions were more important risk factors for fatal outcome in these deaths. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Full Text:** Available from *Elsevier* in [Forensic Science International](#)

#### 79. Detection of methamphetamine and its main metabolite in fingermarks by liquid chromatography-mass spectrometry.

**Citation:** Forensic science international, Mar 2015, vol. 248, p. 10-14 (March 2015)  
**Author(s):** Zhang, Ting; Chen, Xueguo; Yang, Ruiqin; Xu, Yingjian  
**Abstract:** A sensitive and efficient method applying liquid chromatography-mass spectrometry for the analysis of methamphetamine and its main metabolite in fingermark deposits was described. Using this method, good linear relationship of methamphetamine was obtained in the range of 0.005µg to 0.5µg per cotton swab, the limit of detection was 1.5ng per cotton swab, the limit of quantitation was 5.0ng per cotton swab and the average values of recovery ratios were above 70.1%. Moreover, the influence factors for the detection of methamphetamine in fingermarks, such as kinds of substrates, development methods and extraction methods, were all discussed in details. The results showed that good recovery ratios could be obtained on painted wood and smooth substrates surfaces. Development

methods in commercial powder could not influence the quality of examination of exogenous drug in latent fingermark. Furthermore, the results indicated that the method mentioned here could be applied in the analysis of forensic trace evidences and samples obtained in clinically addicted cases. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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**Full Text:** Available from *Elsevier* in [Forensic Science International](#)

#### 80. Explaining the effects of electronic cigarettes on craving for tobacco in recent quitters.

**Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 102-108 (March 1, 2015)  
**Author(s):** Etter, Jean-François  
**Abstract:** To explore how e-cigarettes attenuate craving for tobacco, in e-cigarette users who recently quit smoking. Cross-sectional survey of recent quitters, Internet (French and English), 2012-2014. Participants were 374 daily users of e-cigarettes who had quit smoking in the previous two months, enrolled on websites dedicated to e-cigarettes and to smoking cessation. We measured perception that e-cigarettes attenuate craving for tobacco cigarettes, characteristics of e-cigarettes, modifications of the devices, patterns of e-cigarette use, reasons for use, satisfaction with e-cigarettes, dependence on e-cigarettes, and personal characteristics. The strongest attenuation of craving for tobacco was obtained by using higher nicotine concentrations in refill liquids, modular systems (rather than unmodified devices), and high voltage batteries. The strength of the effect of e-cigarettes on craving was also associated with more intensive use (more puffs per day, more refill liquid). Stronger effects on craving were associated with satisfaction with e-cigarettes, and with reporting that e-cigarettes helped to quit smoking. Participants who reported the strongest effects on craving for tobacco were the most dependent on the e-cigarette and had the strongest urges to vape. From a public health perspective, there is a trade-off between e-cigarettes that provide high levels of nicotine, high satisfaction and more effects on craving for tobacco, but may also be addictive, and e-cigarettes that contain less nicotine and are less addictive, but are also less satisfactory and less efficient at relieving craving and at helping dependent smokers quit smoking. This trade-off must be kept in mind when regulating e-cigarettes. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

#### 81. Police bribery and access to methadone maintenance therapy within the context of drug policy reform in Tijuana, Mexico.

**Citation:** Drug and alcohol dependence, Mar 2015, vol. 148, p. 221-225 (March 1, 2015)  
**Author(s):** Werb, D; Wagner, K D; Beletsky, L; Gonzalez-Zuniga, Patricia; Rangel, Gudelia; Strathdee, S A  
**Abstract:** In 2009, Mexico passed legislation to decriminalize drug possession and improve access to addiction treatment. We undertook research to assess the implementation of the reform among a cohort of people who inject drugs (PWID) in Tijuana. This study specifically sought to determine whether discretionary policing practices like extortion impact access to methadone maintenance therapy (MMT) in Tijuana, a city characterized by high levels of drug-related harms. Generalized estimating equation analyses were used to construct longitudinal confounding models to determine the association between paying a police bribe and MMT enrolment among PWID in Tijuana enrolled in a prospective cohort study. Outcome of interest was MMT enrolment in the past six months. Data on police interactions and MMT enrolment were also obtained. Between October, 2011 and September, 2013, 637 participants provided 1825 observations, with 143 (7.8%) reports of MMT enrolment during the study period. In a final confounding model, recently

reporting being forced to pay a bribe to police was significantly associated with an increased likelihood of accessing MMT (adjusted odds ratio=1.69, 95% confidence interval: 1.02-2.81, p=0.043). However, in 56 (39.2%) cases, MMT enrolment ceased within six months. The majority of participant responses cited the fact that MMT was too expensive (69.1%). Levels of MMT access were low. PWID who experienced police extortion were more likely to access MMT at baseline, though this association decreased during the study period. Coupled with the costs of MMT, this may compromise MMT retention among PWID. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline  
**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

## 82. Suicidal ideation and lifetime attempts in substance and gambling disorders.

**Citation:** Psychiatry research, Feb 2015, vol. 225, no. 3, p. 706-709 (February 28, 2015)  
**Author(s):** Manning, Victoria; Koh, Puay Kee; Yang, Yi; Ng, Andrew; Guo, Song; Kandasami, Gomathinayagam; Wong, Kim Eng  
**Abstract:** Suicidality is more commonly reported among individuals with addictions relative to the general population, though data from Asian countries remain scarce. The medical records of 2187 Singaporean patients with drug (n=879), alcohol (n=754) or gambling (n=554) disorders entering an outpatient treatment service were examined to explore differences in suicidal ideation and lifetime attempts between substance and gambling addictions. The relationship between suicidality, co-morbidity and addiction severity were also examined. 25.0% reported thoughts of suicide in the past month, 11.8% had a suicide plan and 12.2% reported lifetime attempts. Rates of suicidal ideation (thoughts, and plan) but not lifetime attempts were significantly higher among gambling than substance use patients. Co-morbid (DSM-IV axis-1) disorders were found among 32.5%, 38% and 40% of those reporting thoughts, plan and lifetime attempts respectively. Addiction severity was higher and quality of life lower among those reporting suicidal behaviors. Logistic regression revealed co-morbidity, debt, gender (being female) and being a gambling patient as significant predictors of suicidal behaviors. The findings highlight the importance of screening for suicidality, even in the absence of co-morbidity, particularly among gambling disorder patients with debts. Suicide risk should be assessed periodically and referral to suicidal prevention interventions routinely offered to this vulnerable population. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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**Source:** Medline  
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## 83. The reductions in monetary cost and gains in productivity with methadone maintenance treatment: one year follow-up.

**Citation:** Psychiatry research, Feb 2015, vol. 225, no. 3, p. 673-679 (February 28, 2015)  
**Author(s):** Hsiao, Chih Yin; Chen, Kao Chin; Lee, Lan-Ting; Tsai, Hsin Chun; Chang, Wei Hung; Lee, I Hui; Chen, Po See; Lu, Ru-Band; Yang, Yen Kuang  
**Abstract:** While methadone maintenance treatment (MMT) is beneficial for heroin dependence, there is little information regarding the reductions in monetary cost and gains in productivity following MMT. The aim of this study was to evaluate the changes in the monetary cost of heroin addiction and productivity after one year of MMT. Twenty-nine participants from an MMT clinic were included. The monetary cost, productivity, quality of life (QOL) and mental health status were assessed at both baseline and one year follow-up. The average annual total cost was approximately US\$26,485 (1.43 GDP per capita in 2010) at baseline, and decreased by 59.3% to US\$10,784 (0.58 GDP) at follow-up. The mean number of months of unemployment dropped from 6.03 to 2.79, the mean income increased to exceed the basic salary, but only reached 45.3% of the national average monthly earnings. The participants' mental health improved, but their QOL

scores did not increase significantly. After one year of MMT, the monetary cost of heroin addiction fell, both the productivity and mental health of the participants' improved, but limited gains were seen with regard to their QOL. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### **84. Changes in brain-derived neurotrophic factor (BDNF) during abstinence could be associated with relapse in cocaine-dependent patients.**

**Citation:** Psychiatry research, Feb 2015, vol. 225, no. 3, p. 309-314 (February 28, 2015)  
**Author(s):** Corominas-Roso, Margarida; Roncero, Carlos; Daigre, Constanza; Grau-Lopez, Lara; Ros-Cucurull, Elena; Rodríguez-Cintas, Laia; Sanchez-Mora, Cristina; Lopez, Maria Victoria; Ribases, Marta; Casas, Miguel  
**Abstract:** Brain-derived neurotrophic factor (BDNF) is involved in cocaine craving in humans and drug seeking in rodents. Based on this, the aim of this study was to explore the possible role of serum BDNF in cocaine relapse in abstinent addicts. Forty cocaine dependent subjects (DSM-IV criteria) were included in an inpatient 2 weeks abstinence program. Organic and psychiatric co-morbidities were excluded. Two serum samples were collected for each subject at baseline and at after 14 abstinence days. After discharge, all cocaine addicts underwent a 22 weeks follow-up, after which they were classified into early relapsers (ER) (resumed during the first 14 days after discharge,) or late relapsers (LR) (resumed beyond 14 days after discharge). The only clinical differences between groups were the number of consumption days during the last month before detoxification. Serum BDNF levels increased significantly across the 12 days of abstinence in the LR group ( $p=0.02$ ), whereas in the ER group BDNF remained unchanged. In the ER group, the change of serum BDNF during abstinence negatively correlated with the improvement in depressive symptoms ( $p=0.02$ ). These results suggest that BDNF has a role in relapse to cocaine consumption in abstinent addicts, although the underlying neurobiological mechanisms remain to be clarified. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### **85. Cognitive manifestations of drinking-smoking associations: preliminary findings with a cross-primed Stroop task.**

**Citation:** Drug and alcohol dependence, Feb 2015, vol. 147, p. 81-88 (February 1, 2015)  
**Author(s):** Oliver, Jason A; Drobles, David J  
**Abstract:** Despite tremendous growth in research examining the role of cognitive bias in addictive behaviors, scant consideration has been paid to the close association between smoking and drinking behavior. This study sought to determine whether an association between smoking and drinking could be observed at an implicit level using a novel cognitive bias task, as well as characterize the relationship between performance on this task and clinically relevant variables (i.e., heaviness of use/dependence). Individuals (N=51) with a range of smoking and drinking patterns completed a modified Stroop task in which participants identified the color of drinking, smoking and neutral words that were each preceded by drinking, smoking or neutral picture primes. Participants also provided information regarding the heaviness of their smoking and drinking behavior and completed self-report measures of alcohol and nicotine dependence. Response times to smoking and drinking words were significantly slowed following the presentation of either smoking or drinking picture primes. This effect did not differ across subgroups. However, the strength of the coupling between smoking and drinking prime effects was greater among heavier drinkers, who also exhibited a concordant looser coupling of the effects of smoking and drinking primes on smoking words. Associations between

smoking and drinking can be observed at an implicit level and may be strongest for heavier drinkers. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### 86. Continuous exposure to dizocilpine facilitates the acquisition and escalation of cocaine consumption in male Sprague-Dawley rats.

**Citation:** Drug and alcohol dependence, Feb 2015, vol. 147, p. 137-143 (February 1, 2015)  
**Author(s):** Allen, Richard M; Mandt, Bruce H; Jaskunas, Jillian; Hackley, Amanda; Shickedanz, Alyssa; Bergkamp, David  
**Abstract:** Blocking N-methyl-d-aspartate (NMDA) glutamate receptors (NMDARs) prevents cocaine locomotor sensitization, but facilitates escalation of cocaine self-administration and produces ambiguous effects on acquisition of cocaine self-administration. This study used a recently described model of acquisition and escalation to test the hypothesis that continuous NMDAR antagonism functionally increases the effects of a given dose of cocaine. We assessed acquisition of cocaine self-administration (0.6 mg/kg/infusion) in rats treated continuously with either vehicle or the NMDAR antagonist dizocilpine (0.4 mg/kg/day) for 14 consecutive 2h fixed ratio 1 (FR1) sessions. In a separate experiment that assessed the effect of dizocilpine treatment on escalation of cocaine self-administration, rats acquired cocaine self-administration (0.6 mg/kg/infusion) prior to vehicle or dizocilpine treatment. Then, immediately post-acquisition, rats were treated continuously with either vehicle or dizocilpine and allowed to self-administer either 0.6 or 1.2mg/kg/infusion cocaine for an additional seven consecutive 2h FR1 sessions. Relative to vehicle-treated rats, a significantly greater percentage of dizocilpine-treated rats acquired cocaine self-administration. During the escalation experiment, both vehicle- and dizocilpine-treated rats escalated intake of 1.2mg/kg/infusion cocaine. Whereas vehicle-treated rats exhibited stable intake of 0.6 mg/kg/infusion cocaine, dizocilpine-treated rats escalated intake of this moderate cocaine dose to levels indistinguishable from intake levels produced by self-administration of the high cocaine dose (i.e., 1.2mg/kg/infusion). These findings suggest that chronic NMDAR blockade potentiates, rather than attenuates, cocaine's effects and argue for reconsideration of the role of NMDARs in cocaine "addiction-like" behavior. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### 87. Animal models to assess the abuse liability of tobacco products: effects of smokeless tobacco extracts on intracranial self-stimulation.

**Citation:** Drug and alcohol dependence, Feb 2015, vol. 147, p. 60-67 (February 1, 2015)  
**Author(s):** Harris, Andrew C; Tally, Laura; Schmidt, Clare E; Muelken, Peter; Stepanov, Irina; Saha, Subhrakanti; Vogel, Rachel Isaksson; LeSage, Mark G  
**Abstract:** Preclinical models are needed to inform regulation of tobacco products by the Food and Drug Administration (FDA). Typically, animal models of tobacco addiction involve exposure to nicotine alone or nicotine combined with isolated tobacco constituents (e.g. minor alkaloids). The goal of this study was to develop a model using extracts derived from tobacco products that contain a range of tobacco constituents to more closely model product exposure in humans. This study compared the addiction-related effects of nicotine alone and nicotine dose-equivalent concentrations of aqueous smokeless tobacco extracts on intracranial self-stimulation (ICSS) in rats. Extracts were prepared from Kodiak Wintergreen, a conventional product, or Camel Snus, a potential "modified risk tobacco product". Binding affinities of nicotine alone and extracts at various nicotinic acetylcholine receptor (nAChR) subtypes were also compared. Kodiak and Camel Snus



extracts contained levels of minor alkaloids within the range of those shown to enhance nicotine's behavioral effects when studied in isolation. Nonetheless, acute injection of both extracts produced reinforcement-enhancing (ICSS threshold-decreasing) effects similar to those of nicotine alone at low to moderate nicotine doses, as well as similar reinforcement-attenuating/aversive (ICSS threshold-increasing) effects at high nicotine doses. Extracts and nicotine alone also had similar binding affinity at all nAChRs studied. Relative nicotine content is the primary pharmacological determinant of the abuse liability of Kodiak and Camel Snus as measured using ICSS. These models may be useful to compare the relative abuse liability of other tobacco products and to model FDA-mandated changes in product performance standards. Copyright © 2015. Published by Elsevier Ireland Ltd.

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#### 88. Dependence levels in users of electronic cigarettes, nicotine gums and tobacco cigarettes.

**Citation:** Drug and alcohol dependence, Feb 2015, vol. 147, p. 68-75 (February 1, 2015)  
**Author(s):** Etter, Jean-François; Eissenberg, Thomas  
**Abstract:** To assess dependence levels in users of e-cigarettes, and compare them with dependence levels in users of nicotine gums and tobacco cigarettes. Self-reports from cross-sectional Internet and mail surveys. Comparisons of: (a) 766 daily users of nicotine-containing e-cigarettes with 30 daily users of nicotine-free e-cigarettes; (b) 911 former smokers who used the e-cigarette daily with 451 former smokers who used the nicotine gum daily (but no e-cigarette); (c) 125 daily e-cigarette users who smoked daily (dual users) with two samples of daily smokers who did not use e-cigarettes (2206 enrolled on the Internet and 292 enrolled by mail from the general population of Geneva). We used the Fagerström test for nicotine dependence, the nicotine dependence syndrome scale, the cigarette dependence scale and versions of these scales adapted for e-cigarettes and nicotine gums. Dependence ratings were slightly higher in users of nicotine-containing e-cigarettes than in users of nicotine-free e-cigarettes. In former smokers, long-term (>3 months) users of e-cigarettes were less dependent on e-cigarettes than long-term users of the nicotine gum were dependent on the gum. There were few differences in dependence ratings between short-term (≤3 months) users of gums or e-cigarettes. Dependence on e-cigarettes was generally lower in dual users than dependence on tobacco cigarettes in the two other samples of daily smokers. Some e-cigarette users were dependent on nicotine-containing e-cigarettes, but these products were less addictive than tobacco cigarettes. E-cigarettes may be as or less addictive than nicotine gums, which themselves are not very addictive. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### 89. Upstream open reading frames regulate cannabinoid receptor 1 expression under baseline conditions and during cellular stress.

**Citation:** Molecular and cellular endocrinology, Jan 2015, vol. 399, p. 103-109 (January 5, 2015)  
**Author(s):** Eggert, M; Pfob, M; Jurinovic, V; Schelling, G; Steinlein, O K  
**Abstract:** The cannabinoid receptor subtype 1 gene CNR1 is not only associated with phenotypes such as cognitive performance, addiction and anxiety, but is also known to be crucially involved in responses to acute and chronic psychological and cellular stress conditions. Functional analysis of the 5' untranslated regions of the five known mRNA variants of the human CNR1 gene revealed that two of these variants contain upstream open reading frames that are able to modulate gene expression both under baseline condition and conditions of cellular stress including hypoxia, glucose restriction and hyperthermia. The upstream open reading frames might provide a mechanism that enables the cannabinoid 1

receptor to escape the general repression of protein synthesis that is typical for conditions of cellular stress. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### 90. The impact of a Housing First randomized controlled trial on substance use problems among homeless individuals with mental illness.

**Citation:** Drug and alcohol dependence, Jan 2015, vol. 146, p. 24-29 (January 1, 2015)

**Author(s):** Kirst, Maritt; Zerger, Suzanne; Misir, Vachan; Hwang, Stephen; Stergiopoulos, Vicky

**Abstract:** There is strong evidence that Housing First interventions are effective in improving housing stability and quality of life among homeless people with mental illness and addictions. However, there is very little evidence on the effectiveness of Housing First in improving substance use-related outcomes in this population. This study uses a randomized control design to examine the effects of scatter-site Housing First on substance use outcomes in a large urban centre. Substance use outcomes were compared between a Housing First intervention and treatment as usual group in a sample of 575 individuals experiencing homelessness and mental illness, with or without a co-occurring substance use problem, in the At Home/Chez Soi trial in Toronto, Canada. Generalized linear models were used to compare study arms with respect to change in substance use outcomes over time (baseline, 6, 12, 18 and 24 month). At 24 months, participants in the Housing First intervention had significantly greater reductions in number of days experiencing alcohol problems and amount of money spent on alcohol than participants in the Treatment as Usual group. No differences between the study arms in illicit drug outcomes were found at 24 months. These findings show that a Housing First intervention can contribute to reductions in alcohol problems over time. However, the lack of effect of the intervention on illicit drug problems suggests that individuals experiencing homelessness, mental illness and drug problems may need additional supports to reduce use. Current controlled trials ISRCTN42520374. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### 91. A generalized matching law analysis of cocaine vs. food choice in rhesus monkeys: effects of candidate 'agonist-based' medications on sensitivity to reinforcement.

**Citation:** Drug and alcohol dependence, Jan 2015, vol. 146, p. 52-60 (January 1, 2015)

**Author(s):** Hutsell, Blake A; Negus, S Stevens; Banks, Matthew L

**Abstract:** We have previously demonstrated reductions in cocaine choice produced by either continuous 14-day phendimetrazine and d-amphetamine treatment or removing cocaine availability under a cocaine vs. food choice procedure in rhesus monkeys. The aim of the present investigation was to apply the concatenated generalized matching law (GML) to cocaine vs. food choice dose-effect functions incorporating sensitivity to both the relative magnitude and price of each reinforcer. Our goal was to determine potential behavioral mechanisms underlying pharmacological treatment efficacy to decrease cocaine choice. A multi-model comparison approach was used to characterize dose- and time-course effects of both pharmacological and environmental manipulations on sensitivity to reinforcement. GML models provided an excellent fit of the cocaine choice dose-effect functions in individual monkeys. Reductions in cocaine choice by both pharmacological and environmental manipulations were principally produced by systematic decreases in sensitivity to reinforcer price and non-systematic changes in sensitivity to reinforcer magnitude. The modeling approach used provides a theoretical link between the

experimental analysis of choice and pharmacological treatments being evaluated as candidate 'agonist-based' medications for cocaine addiction. The analysis suggests that monoamine releaser treatment efficacy to decrease cocaine choice was mediated by selectively increasing the relative price of cocaine. Overall, the net behavioral effect of these pharmacological treatments was to increase substitutability of food pellets, a nondrug reinforcer, for cocaine. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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### 92. Effect of the environmental enrichment on the severity of psychological dependence and voluntary methamphetamine consumption in methamphetamine withdrawn rats.

**Citation:** Neuroscience letters, Jan 2015, vol. 584, p. 151-155 (January 1, 2015)  
**Author(s):** Hajheidari, Samira; Miladi-Gorji, Hossein; Bigdeli, Imanollah  
**Abstract:** Previously results have been shown that chronic methamphetamine causes dependence, withdrawal syndrome and drug craving. Also, environmental enrichment (EE) has been shown protective effects in several animal models of addiction. This study evaluated effect of the EE on the anxiety-depression profile and voluntary METH consumption in METH-dependent rats after abstinence. The rats were chronically treated with bi-daily doses (2 mg/kg, at 12 h intervals) of METH over a period of 14 days. METH dependent rats reared in standard environment (SE) or EE during spontaneous METH withdrawal which lasted 30 days. Then, the rats were tested for anxiety (the elevated plus maze-EPM) and depression (forced swim test-FST) and also voluntary consumption of METH using a two-bottle choice paradigm (TBC). The results showed that the EE rats exhibited an increase in EPM open arm time and entries (P

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### 93. Psychophysiology of pain and opioid use: implications for managing pain in patients with an opioid use disorder.

**Citation:** Drug and alcohol dependence, Jan 2015, vol. 146, p. 1-6 (January 1, 2015)  
**Author(s):** Wachholtz, Amy; Foster, Simmie; Cheatle, Martin  
**Abstract:** Opioid therapy is one component of an effective pain management regimen for patients with chronic pain and the majority of these patients use their medications responsibly. However, there are a growing number of these patients who develop an opioid use disorder and in some cases require opioid replacement therapy. Managing these patients is complex and the underlying mechanisms of pain and addiction are not well understood. Developing an effective interdisciplinary treatment program for the individual with pain and an opioid use disorder will depend on enhancing our knowledge of the psychophysiology of pain and addiction. Authors gathered key empirical and theoretical papers examining the psychophysiology of comorbid pain and opioid misuse disorders. This article reviews the current theory of the effect of pain on patients with pain and concomitant addiction, the psychophysiology of pain, opioid use and addiction, and future research in this area. Individuals with a history of opioid misuse have greater levels of hyperalgesia which may be due to alterations in psychophysiological pathways. More research is needed into the psychophysiological biomarkers among individuals with comorbid pain and addiction in order to develop better treatment approaches and improve outcomes among this difficult to treat population. Copyright © 2014 Elsevier Ireland Ltd. All rights reserved.

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#### 94. Reward-based decision making in pathological gambling: the roles of risk and delay.

**Citation:** Neuroscience research, Jan 2015, vol. 90, p. 3-14 (January 2015)

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

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

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#### 95. Changes in resting EEG following methadone treatment in opiate addicts.

**Citation:** Clinical neurophysiology : official journal of the International Federation of Clinical Neurophysiology, May 2015, vol. 126, no. 5, p. 943-950 (May 2015)

**Author(s):** Wang, Grace Y; Kydd, Rob; Wouldes, Trecia A; Jensen, Maree; Russell, Bruce R

**Abstract:** This study investigated the electrophysiological activity associated with methadone maintenance treatment (MMT). The resting EEG spectrum of beta (14.5-30Hz), alpha (8-13Hz), theta (4-7.5Hz) and delta (1.5-3.5Hz) rhythm were measured in 32 patients undertaking chronic MMT, 17 opiate users and 25 healthy volunteers. Differences in the EEG components of each group were evaluated using a repeated measures Analyses of Variance (ANOVA). Post-hoc comparisons were Bonferroni corrected. Our results show that either patients undertaking MMT or active opiate users exhibited a significant increase in the power of beta and theta bands relative to healthy control subjects. However, the spectral power of patients undertaking MMT fell between that of current opiate users and healthy control subjects on many regional EEG measures. There was an inverse correlation between the power of beta or theta bands and cognitive performance. The abnormal neural electrical activity present in those still using illicit opiates might be reduced following MMT. The present findings provide further support for MMT of opiate dependence and demonstrates potentially positive effects of substitution treatment on brain function. Copyright © 2014 International Federation of Clinical Neurophysiology. Published by Elsevier Ireland Ltd. All rights reserved.

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