

# Search Results

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## Search History

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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.

## 1. Prevalence and experience of chronic pain in suburban drug injectors.

- Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 92-100 (June 1, 2015)
- Author(s):** Heimer, Robert; Zhan, Weihai; Grau, Laretta E
- Abstract:** To explore the relationship between chronic pain and characteristics, behaviors, and psychological status of suburban Connecticut injection drug users. Cross-sectional study with quantitative interview and serological testing for HIV and hepatitis B and C in 456 individuals who injected drugs in the past month. Participants were dichotomized into those reporting current chronic pain of at least six months duration and all others. The interview covered (i) sociodemographics, (ii) injection drug use, (iii) interactions with drug treatment, criminal justice, and harm reduction, (iv) screening for alcohol use, chronic pain, anxiety, and depression, and (v) knowledge regarding HIV, hepatitis B (HBV) and C (HCV), and opioid overdose. Serological testing for HIV, HBV, and HCV was conducted. One-third (n=143) reported chronic pain. These individuals differed significantly from those not reporting chronic pain on characteristics that included older age, lower educational achievement, and injection of pharmaceutical opioids. They also reported experiencing more psychological and family problems on the ASI and higher levels of depression and anxiety. Four of five individuals with chronic pain (n=117) reported non-medical opioid use prior to the onset of chronic pain. Chronic pain is common among drug injectors in our study population although it was unusual for chronic pain to have preceded non-medical opioid use. Psychological problems in injectors with co-occurring chronic pain are likely pose significant complications to successful treatment for substance abuse, pain, or infectious disease treatment. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

## 2. An assessment of detection canine alerts using flowers that release methyl benzoate, the cocaine odorant, and an evaluation of their behavior in terms of the VOCs produced.

- Citation:** Forensic science international, Jun 2015, vol. 251, p. 107-114 (June 2015)
- Author(s):** Cerreta, Michelle M; Furton, Kenneth G
- Abstract:** In recent years, the high frequency of illicit substance abuse reported in the United States has made the development of efficient and rapid detection methods important. Biological detectors, such as canines (*Canis familiaris*), are valuable tools for rapid, on-site identification of illicit substances. However, research indicates that in many cases canines do not alert to the contraband, but rather to the volatile organic compounds (VOCs) that are released from the contraband, referred to as the "active odor." In 2013, canine accuracy and reliability were challenged in the Supreme Court case, *State of Florida v. Jardines*. In this case, it was stated that if a canine alerts to the active odor, and not the contraband, the canine's accuracy and selectivity could be questioned, since many of these compounds have been found in common household products. Specifically, methyl benzoate, the active odor of cocaine, has been found to be the most abundant compound produced by snapdragon flowers. Therefore, the purpose of this study is to evaluate the odor profiles of various species of snapdragon flowers to assess how significantly methyl benzoate contributes to the total VOC profile or fragrance that is produced. Particularly, this study examines the VOCs released from newly grown snapdragon flowers and determines its potential at eliciting a false alert from specially trained detection canines. The ability of detection canines to differentiate between cocaine and snapdragon flowers was determined in order to validate the field accuracy and discrimination power of these detectors. An optimized method using headspace solid-phase microextraction coupled with gas chromatography-mass spectrometry (HS-SPME/GC-MS) was used to test the different types and abundances of compounds generated from snapdragon flowers at various stages throughout the plants' life cycle. The results indicate that although methyl benzoate is present in the odor profile of snapdragon flowers, other compounds are present that contribute significantly, if not more, than that of methyl benzoate. Canine

teams, from various police departments throughout South Florida, certified for narcotics detection, took part in this study. Two canine trials involving 21 canines teams were performed by exposing the teams to 4 different species of snapdragon flowers. Of the 21 canine teams tested, none alerted to the snapdragon flowers presented, while all (100%) alerted to real cocaine samples, the positive control. Notably, the results revealed that although methyl benzoate is produced by snapdragon flowers, certified narcotics detection canines can distinguish cocaine's odor profile from that of snapdragon flowers. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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### 3. Burden of substance use disorders, mental illness, and correlates of infectious diseases among soon-to-be released prisoners in Azerbaijan.

**Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 68-75 (June 1, 2015)  
**Author(s):** Azbel, Lyuba; Wickersham, Jeffrey A; Wegman, Martin P; Polonsky, Maxim; Suleymanov, Murad; Ismayilov, Rafik; Dvoryak, Sergey; Rotberga, Signe; Altice, Frederick L  
**Abstract:** Despite low HIV prevalence in the South Caucasus region, transmission is volatile. Little data are available from this region about addiction and infectious diseases among prisoners who transition back to communities. A nation-wide randomly sampled biobehavioral health survey was conducted in 13 non-specialty Azerbaijani prisons among soon-to-be-released prisoners. After informed consent, participants underwent standardized health assessment surveys and testing for HIV, hepatitis B and C, and syphilis. Of the 510 participants (mean age=38.2 years), 11.4% were female, and 31.9% reported pre-incarceration drug injection, primarily of heroin. Prevalence of HCV (38.2%), HIV (3.7%), syphilis (3.7%), and HBV (2.7%) was high. Among the 19 HIV-infected inmates, 14 (73.7%) were aware of their HIV status, 12 (63.2%) were receiving antiretroviral therapy (ART), and 5 (26.3%) had CD4<350cells/mL (4 of these were on ART). While drug injection was the most significant independent correlate of HCV (AOR=12.9; p=0.001) and a significant correlate of HIV (AOR=8.2; p=0.001), both unprotected sex (AOR=3.31; p=0.049) and working in Russia/Ukraine (AOR=4.58; p=0.008) were also correlated with HIV. HIV and HCV epidemics are concentrated among people who inject drugs (PWIDs) in Azerbaijan, and magnified among prisoners. A transitioning HIV epidemic is emerging from migration from high endemic countries and heterosexual risk. The high diagnostic rate and ART coverage among Azerbaijani prisoners provides new evidence that HIV treatment as prevention in former Soviet Union (FSU) countries is attainable, and provides new insights for HCV diagnosis and treatment as new medications become available. Within prison evidence-based addiction treatments with linkage to community care are urgently needed. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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### 4. Denial in methamphetamine users: Associations with cognition and functional connectivity in brain.

**Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 84-91 (June 1, 2015)  
**Author(s):** Dean, Andy C; Kohno, Milky; Morales, Angelica M; Ghahremani, Dara G; London, Edythe D  
**Abstract:** Despite harmful consequences of drug addiction, it is common for individuals with substance use disorders to deny having problems with drugs. Emerging evidence suggests that some drug users lack insight into their behavior due to neurocognitive dysfunction, but little research has examined potential neurocognitive contributions to denial. This study explored the relationship between denial, cognitive performance and functional

connectivity in brain. The participants were 58 non-treatment-seeking, methamphetamine-dependent participants who completed the URICA precontemplation scale, a self-report measure of denial of drug problems warranting change, as well as a cognitive test battery. A subset of participants (N=21) had functional MRI scans assessing resting-state functional connectivity. Given literature indicating roles of the rostral anterior cingulate (rACC), anterior insula and precuneus in self-awareness, relationships between denial and resting-state connectivity were tested using seeds placed in these regions. The results revealed a negative relationship between denial and an overall cognitive battery score ( $p=0.001$ ), the effect being driven particularly by performance on tests of memory and executive function. Denial was negatively associated with strength of connectivity between the rACC and regions of the frontal lobe (precentral gyri, left ventromedial prefrontal cortex, left orbitofrontal cortex), limbic system (left amygdala, left hippocampus and left parahippocampal gyrus), occipital lobes and cerebellum; and between the precuneus and the midbrain and cerebellum. Anterior insula connectivity was unrelated to denial. These findings suggest that denial by methamphetamine users is linked with a cognitive and neural phenotype that may impede the development of insight into their behavior. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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#### 5. Correction to Field et al. (2015).

**Citation:** Psychology of addictive behaviors : journal of the Society of Psychologists in Addictive Behaviors, Jun 2015, vol. 29, no. 2, p. 337. (June 2015)

**Abstract:** Reports an error in "The validity of different measures of automatic alcohol action tendencies" by Inge Kersbergen, Marcella L. Woud and Matt Field (Psychology of Addictive Behaviors, 2015[Mar], Vol 29[1], 225-230). In the Online First August 18, 2014, version of this report, there was an error in the byline for Inge Kersbergen and Matt Field. Both authors are affiliated with the University of Liverpool and United Kingdom Centre for Tobacco and Alcohol Studies, Liverpool, United Kingdom. All versions of this article have been corrected. (The following abstract of the original article appeared in record 2014-33794-001.) Previous studies have demonstrated that automatic alcohol action tendencies are related to alcohol consumption and hazardous drinking. These action tendencies are measured with reaction time tasks in which the latency to make an approach response to alcohol pictures is compared with the latency to make an avoidance response. In the literature, 4 different tasks have been used, and these tasks differ on whether alcohol is a relevant (R) or irrelevant (IR) feature for categorization and on whether participants must make a symbolic approach response (stimulus-response compatibility [SRC] tasks) or an overt behavioral response (approach avoidance tasks [AAT]) to the pictures. Previous studies have shown positive correlations between measures of action tendencies and hazardous drinking and weekly alcohol consumption. However, results have been inconsistent and the different measures have not been directly compared with each other. Therefore, it is unclear which task is the best predictor of hazardous drinking and alcohol consumption. In the present study, 80 participants completed all 4 measures of action tendencies (i.e., R-SRC, IR-SRC, R-AAT, and IR-AAT) and measures of alcohol consumption and hazardous drinking. Stepwise regressions showed that the R-SRC and R-AAT were the only significant predictors of hazardous drinking, whereas the R-AAT was the only reliable predictor of alcohol consumption. Our results confirm that drinking behavior is positively correlated with automatic alcohol approach tendencies, but only if alcohol-relatedness is the relevant feature for categorization. Theoretical implications and methodological issues are discussed. (PsycINFO Database Record (c) 2015 APA, all rights reserved).

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**Source:** Medline

#### 6. Factors affecting repeated cessations of injecting drug use and relapses during the entire injecting career among the Edinburgh Addiction Cohort.

- Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 76-83 (June 1, 2015)
- Author(s):** Xia, Yang; Seaman, Shaun; Hickman, Matthew; Macleod, John; Robertson, Roy; Copeland, Lorraine; McKenzie, Jim; De Angelis, Daniela
- Abstract:** Injecting drug use is a chronic condition, with people who inject drugs (PWID) typically experiencing repeated cessations and relapses during their injection careers. We characterize patterns of ceasing and relapsing and the impact of opiate substitution treatment (OST) during the entire injecting careers of PWID in the Edinburgh Addiction Cohort (EAC). During 2005-2007, 432 surviving participants of the EAC were interviewed about their injecting histories. Adjusted associations between covariates and hazards of cessation and relapse were estimated using random-effects models. OST was strongly associated with a higher hazard of cessation (HR=1.71, P<0.001), but there was no significant evidence of association with hazard of relapse (HR=0.81, P=0.14). Women and older PWID were less likely to relapse (HR=0.73, P=0.02 and HR=0.55, P<0.001, respectively). Hazards of both cessation and relapse decreased monotonically with time since last relapse/cessation (both P<0.001). An individual's hazard of cessation increased with his/her number of previous cessations (HR=3.58 for 10+ previous cessations, P<0.001), but there was no evidence that an individual's hazard of relapse changed with number of previous relapses (P=0.37). There was heterogeneity in the individual hazards of both cessation and relapse. OST was associated with reduced time to cessation, and there was some suggestion of increased time to relapse too. The likelihood of prolonged cessation is greater for women, increases with age, and decreases with time since last relapse. Crown Copyright © 2015. Published by Elsevier Ireland Ltd. All rights reserved.
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#### 7. Predictors of the nicotine reinforcement threshold, compensation, and elasticity of demand in a rodent model of nicotine reduction policy.

- Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 181-193 (June 1, 2015)
- Author(s):** Grebenstein, Patricia E; Burroughs, Danielle; Roiko, Samuel A; Pentel, Paul R; LeSage, Mark G
- Abstract:** The FDA is considering reducing the nicotine content in tobacco products as a population-based strategy to reduce tobacco addiction. Research is needed to determine the threshold level of nicotine needed to maintain smoking and the extent of compensatory smoking that could occur during nicotine reduction. Sources of variability in these measures across sub-populations also need to be identified so that policies can take into account the risks and benefits of nicotine reduction in vulnerable populations. The present study examined these issues in a rodent nicotine self-administration model of nicotine reduction policy to characterize individual differences in nicotine reinforcement thresholds, degree of compensation, and elasticity of demand during progressive reduction of the unit nicotine dose. The ability of individual differences in baseline nicotine intake and nicotine pharmacokinetics to predict responses to dose reduction was also examined. Considerable variability in the reinforcement threshold, compensation, and elasticity of demand was evident. High baseline nicotine intake was not correlated with the reinforcement threshold, but predicted less compensation and less elastic demand. Higher nicotine clearance predicted low reinforcement thresholds, greater compensation, and less elastic demand. Less elastic demand also predicted lower reinforcement thresholds. These findings suggest that baseline nicotine intake, nicotine clearance, and the essential value of nicotine (i.e. elasticity of demand) moderate the effects of progressive nicotine reduction in rats and warrant further study in humans. They also suggest that smokers with fast nicotine metabolism may be more vulnerable to the risks of nicotine reduction. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.
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## 8. Evidence of injection drug use in Kisumu, Kenya: Implications for HIV prevention.

- Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 262-266 (June 1, 2015)
- Author(s):** Syvertsen, Jennifer L; Agot, Kawango; Ohaga, Spala; Strathdee, Steffanie A; Camlin, Carol S; Omanga, Eunice; Odonde, Petronilla; Rota, Grace; Akoth, Kelvin; Peng, Juan; Wagner, Karla D
- Abstract:** Injection drug use is increasingly contributing to the HIV epidemic across sub-Saharan Africa. This paper provides the first descriptive analysis of injection drug use in western Kenya, where HIV prevalence is already highest in the nation at 15.1%. We draw on quantitative data from a study of injection drug use in Kisumu, Kenya. We generated descriptive statistics on socio-demographics, sexual characteristics, and drug-related behaviors. Logistic regression models were adjusted for sex to identify correlates of self-reported HIV positive status. Of 151 participants, mean age was 28.8 years, 84% (n=127) were male, and overall self-reported HIV prevalence reached 19.4%. Women had greater than four times the odds of being HIV positive relative to men (Odds Ratio [OR] 4.5, CI: 1.7, 11.8, p=.003). Controlling for sex, ever experiencing STI symptoms (Adjusted Odds ratio [AOR] 4.6, 95% CI 1.7, 12.0, p=.002) and sharing needles or syringes due to lack of access (AOR 3.6, 95% CI 1.2, 10.5, p=.02) were significantly associated with HIV positive status. Lower education (AOR 2.3, 95% CI 0.9, 5.6, p=.08), trading sex for drugs (AOR 2.8, 95% CI 0.9, 8.8, p=.08), being injected by a peddler (AOR 2.9, 95% CI 1.0, 8.5, p=.05), and injecting heroin (AOR 2.3, 95% CI 1.0, 5.7, p=.06), were marginally associated with HIV. This exploratory study identified patterns of unsafe drug injection and concurrent sexual risk in western Kenya, yet few resources are currently available to address addiction or injection-related harm. Expanded research, surveillance, and gender sensitive programming are needed. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.
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- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

## 9. Reduced frontal cortical thickness and increased caudate volume within fronto-striatal circuits in young adult smokers.

- Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 211-219 (June 1, 2015)
- Author(s):** Li, Yangding; Yuan, Kai; Cai, Chenxi; Feng, Dan; Yin, Junsen; Bi, Yanzhi; Shi, Sha; Yu, Dahua; Jin, Chenwang; von Deneen, Karen M; Qin, Wei; Tian, Jie
- Abstract:** Smoking during early adulthood results in neurophysiological and brain structural changes that may promote nicotine dependence later in life. Previous studies have revealed the important roles of fronto-striatal circuits in the pathology of nicotine dependence; however, few studies have focused on both cortical thickness and subcortical striatal volume differences between young adult smokers and nonsmokers. Twenty-seven young male adult smokers and 22 age-, education- and gender-matched nonsmokers were recruited in the present study. The cortical thickness and striatal volume differences of young adult smokers and age-matched nonsmokers were investigated in the present study and then correlated with pack-years and Fagerström Test for Nicotine Dependence (FTND). The following results were obtained: (1) young adult smokers showed significant cortical thinning in the frontal cortex (left caudal anterior cingulate cortex (ACC), right lateral orbitofrontal cortex (OFC)), left insula, left middle temporal gyrus, right inferior parietal lobule, and right parahippocampus; (2) in regards to subcortical striatal volume, the volume of the right caudate was larger in young adult smokers than nonsmokers; and (3) the cortical thickness of the right dorsolateral prefrontal cortex (DLPFC) and OFC were associated with nicotine dependence severity (FTND) and cumulative amount of nicotine intake (pack-years) in smokers, respectively. This study revealed reduced frontal cortical thickness and increased caudate volume in the fronto-striatal circuits in young adult smokers compared to nonsmokers. These deficits suggest an imbalance between cognitive control (reduced protection factors) and reward

drive behaviours (increased risk factors) associated with nicotine addiction and relapse.  
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#### 10. Impaired Bayesian learning for cognitive control in cocaine dependence.

**Citation:** Drug and alcohol dependence, Jun 2015, vol. 151, p. 220-227 (June 1, 2015)  
**Author(s):** Ide, Jaime S; Hu, Sien; Zhang, Sheng; Yu, Angela J; Li, Chiang-Shan R  
**Abstract:** Cocaine dependence is associated with cognitive control deficits. Here, we apply a Bayesian model of stop-signal task (SST) performance to further characterize these deficits in a theory-driven framework. A "sequential effect" is commonly observed in SST: encounters with a stop trial tend to prolong reaction time (RT) on subsequent go trials. The Bayesian model accounts for this by assuming that each stop/go trial increases/decreases the subject's belief about the likelihood of encountering a subsequent stop trial,  $P(\text{stop})$ , and that  $P(\text{stop})$  strategically modulates RT accordingly. Parameters of the model were individually fit, and compared between cocaine-dependent (CD,  $n=51$ ) and healthy control (HC,  $n=57$ ) groups, matched in age and gender and both demonstrating a significant sequential effect ( $p<0.05$ ). Model-free measures of sequential effect, post-error slowing (PES) and post-stop slowing (PSS), were also compared across groups. By comparing individually fit Bayesian model parameters, CD were found to utilize a smaller time window of past experiences to anticipate  $P(\text{stop})$  ( $p<0.003$ ), as well as showing less behavioral adjustment in response to  $P(\text{stop})$  ( $p<0.015$ ). PES ( $p=0.19$ ) and PSS ( $p=0.14$ ) did not show group differences and were less correlated with the Bayesian account of sequential effect in CD than in HC. Cocaine dependence is associated with the utilization of less contextual information to anticipate future events and decreased behavioral adaptation in response to changes in such anticipation. These findings constitute a novel contribution by providing a computationally more refined and statistically more sensitive account of altered cognitive control in cocaine addiction.  
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