

Search Results

Table of Contents

Search History	page 2
1. Treatment outcomes for veterans with PTSD and substance use: Impact of specific substances and achievement of abstinence.	page 3
2. Perceptions of research risk and undue influence: Implications for ethics of research conducted with cocaine users.	page 3
3. In vivo detection of the new psychoactive substance AM-694 and its metabolites.	page 4
4. Personality and smoking: individual-participant meta-analysis of nine cohort studies.	page 4
5. Examining the profile of high-potency cannabis and its association with severity of cannabis dependence.	page 5
6. Changes in the rate of nicotine metabolism across pregnancy: a longitudinal study.	page 5
7. Prescribing opioid analgesics for chronic non-malignant pain in general practice - a survey of attitudes and practice.	page 6
8. Alterations of neuronal precursor cells in stages of human adult neurogenesis in heroin addicts.	page 6
9. Jurisdictional differences in opioid use, other licit and illicit drug use, and harms associated with substance use among people who tamper with pharmaceutical opioids.	page 7
10. Wheel running exercise attenuates vulnerability to self-administer nicotine in rats.	page 8
11. Do consumers substitute opium for hashish? An economic analysis of simultaneous cannabinoid and opiate consumption in a legal regime.	page 8
12. Item banks for substance use from the Patient-Reported Outcomes Measurement Information System (PROMIS®): Severity of use and positive appeal of use.	page 9
13. Varenicline decreases nicotine but not alcohol self-administration in genetically selected Marchigian Sardinian alcohol-preferring (msP) rats.	page 9
14. Prescription of opioid analgesics for nontraumatic dental conditions in emergency departments.	page 10
15. Association between morningness/eveningness, addiction severity and psychiatric disorders among individuals with addictions.	page 10
16. History of sexual, emotional or physical abuse and psychiatric comorbidity in substance-dependent patients.	page 11

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.

1. Treatment outcomes for veterans with PTSD and substance use: Impact of specific substances and achievement of abstinence.

- Citation:** Drug and alcohol dependence, Nov 2015, vol. 156, p. 70-77 (November 1, 2015)
- Author(s):** Manhapra, Ajay; Stefanovics, Elina; Rosenheck, Robert
- Abstract:** Scant longitudinal data exists about the interplay between specific substances of abuse, the achievement of abstinence, and clinical outcomes in the treatment of dually diagnosed Veterans with post-traumatic stress disorder (PTSD). As part of a national program evaluation, Veterans admitted from the community to specialized intensive PTSD programs were assessed at intake and 4 months after discharge. Seven mutually exclusive groups were identified from admission self-report data (N=22,948): no substance use, exclusive use of alcohol, opiates, sedatives, cocaine, marijuana, and use of three or more substances. Analysis of covariance, adjusting for potentially confounding baseline variables was used to compare change among these seven groups in non-substance use outcomes (PTSD symptoms, violent behavior, suicidality, medical problems, and employment). The effect of abstinence on specific groups was evaluated as the interaction of group membership by abstinence. All outcome measures except for employment showed significant improvement, with few differences between the groups. Although rate of abstinence differed markedly between the groups, abstinence achievement was associated with greater improvement on all the outcomes except employment in every group. No significant differences in the effect of abstinence across the substance abuse groups were observed. The specific type of substance used prior to entry into treatment among dually diagnosed PTSD patients seems to have limited effect on treatment outcomes. However, attainment of abstinence at 4 months after treatment, irrespective of the substances abused, was strongly associated with improvement in PTSD symptoms, violence, suicidality and medical problems. Published by Elsevier Ireland Ltd.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

2. Perceptions of research risk and undue influence: Implications for ethics of research conducted with cocaine users.

- Citation:** Drug and alcohol dependence, Nov 2015, vol. 156, p. 304-310 (November 1, 2015)
- Author(s):** Strickland, Justin C; Stoops, William W
- Abstract:** Despite the prominence of human laboratory and clinical trial research in the development of interventions for substance use disorders, this research presents numerous ethical challenges. Ethical principles outlined in the Belmont Report, including respect for persons, beneficence, and justice, have traditionally guided research conduct. Few empirical studies exist examining substance abuse research ethics. The present study examined perceptions of beneficence and respect for persons in substance use research, including relative risk and desired monetary compensation, using an online sample of cocaine users. The study was conducted on Amazon.com's Mechanical Turk (mTurk), a crowdsourcing website used for survey-based research. Of 1764 individuals screened, 138 reported past year cocaine use. These respondents completed a battery of standardized and experimenter-designed questionnaires used to characterize each respondent's self-reported attitudes, beliefs, and behaviors about drug use and the relative risks and desired monetary compensation associated with research participation. Ratings of relative risk revealed that most respondents found common research practices as less than or equal to the relative risk of everyday life. Receiving experimental medication outside the hospital was rated as the most risky research activity, but on average was not rated as presenting more risk than everyday life. Desired compensation for research participation was associated with the perceived risk of research activities. Increases in desired compensation for participation were only observed for research perceived as much more risky than everyday activities. These findings indicate that cocaine users assess risk in a way that is consistent with standard research practice. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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

3. In vivo detection of the new psychoactive substance AM-694 and its metabolites.

Citation: Forensic science international, Nov 2015, vol. 256, p. 21-27 (November 2015)
Author(s): Bertol, Elisabetta; Vaiano, Fabio; Milia, Maria Grazia Di; Mari, Francesco
Abstract: AM-694 or 1-(5-fluoropentyl)-3-(2-iodobenzoyl)indole is a synthetic cannabinoid that acts as a selective and a powerful agonist for CB1 receptor, inducing cannabinoid-like effects (euphoria, sedation, hallucinations and anxiety). Its spread, like for other synthetic cannabinoids, has increased in recent years and many web sources freely supply these kinds of new drugs. It can be taken by smoking or through oral consumption. A 25-years-old man was hospitalized at the local hospital following a major trauma after ingestion of alcohol and an unknown pill. Urine and blood samples were sent to our Forensic Toxicology Division to investigate on possible substance abuse. A general unknown screening of biological samples, extracted by liquid-liquid extraction (ethylacetate and dichloromethane) in basic, acidic and neutral conditions, was achieved to verify the presence of drugs of abuse and/or their metabolites, both in gas chromatography-mass spectrometry (GC-MS) and liquid chromatography-tandem mass spectrometry (LC-MS/MS). For the quantification of AM-694, urine was extracted by solid phase extraction (SPE) on a Bond Elut Certify cartridge; an acidic hydrolysis (HCl 30%, 95°C, 60min) was necessary before liquid-liquid extraction of metabolites. For the detection of benzodiazepines and their metabolites, an enzymatic hydrolysis was applied (β -glucuronidase, pH 4.5, 50°C, 18h). Quantification of AM-694 (internal standard AM-2201), midazolam and α -hydroxymidazolam (internal standard halazepam) were performed by LC-MS/MS analysis in multiple reaction monitoring ($[M+H]^+$): m/z 436 \rightarrow 190, 272, AM-694; m/z 360 \rightarrow 155, 127, AM-2201; m/z 326 \rightarrow 291, 223, midazolam; m/z 342 \rightarrow 168, 203, α -hydroxymidazolam; m/z 353 \rightarrow 241, 222, halazepam). The general unknown screening revealed the presence of AM-694 (urine sample) and benzodiazepines (urine and blood). The concentration of AM-694, obtained by LC-MS/MS, was 0.084 μ g/L. Midazolam and α -hydroxymidazolam were detected in urine (0.97 and 74.58 μ g/L, respectively) and in blood (34.84 and 23.15 μ g/L, respectively). Qualitative information about the AM-694 metabolites was obtained by LC-MS/MS in selected-ion monitoring for the putative $[M+H]^+$ ions: m/z 448, carboxylated metabolite; m/z 434, defluorinated metabolite; quantification was not possible since reference standards are not available. Our report is the first case of detection of AM-694 and its metabolites in human biological fluids in Italy. For this reason, this case constitutes a first worrisome alarm about the spread of this substance. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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

4. Personality and smoking: individual-participant meta-analysis of nine cohort studies.

Citation: Addiction (Abingdon, England), Nov 2015, vol. 110, no. 11, p. 1844-1852 (November 2015)
Author(s): Hakulinen, Christian; Hintsanen, Mirka; Munafò, Marcus R; Virtanen, Marianna; Kivimäki, Mika; Batty, George David; Jokela, Markus
Abstract: To investigate cross-sectional and longitudinal associations between personality and smoking, and test whether socio-demographic factors modify these associations. Cross-sectional and longitudinal individual-participant meta-analysis. Nine cohort studies from Australia, Germany, the United Kingdom and the United States. A total of 79 757 men and women (mean age = 50.8 years). Personality traits of the five-factor model (extraversion, neuroticism, agreeableness, conscientiousness and openness to experience)

were used as exposures. Outcomes were current smoking status (current smoker, ex-smoker and never smoker), smoking initiation, smoking relapse and smoking cessation. Associations between personality and smoking were modelled using logistic and multinomial logistic regression, and study-specific findings were combined using random-effect meta-analysis. Current smoking was associated with higher extraversion [odds ratio per 1 standard deviation increase in the score: 1.16; 95% confidence interval (CI) = 1.08-1.24], higher neuroticism (1.19; 95% CI = 1.13-1.26) and lower conscientiousness (95% CI = 0.88; 0.83-0.94). Among non-smokers, smoking initiation during the follow-up period was predicted prospectively by higher extraversion (1.22; 95% CI = 1.04-1.43) and lower conscientiousness (0.80; 95% CI = 0.68-0.93), whereas higher neuroticism (1.16; 95% CI = 1.04-1.30) predicted smoking relapse among ex-smokers. Among smokers, smoking cessation was negatively associated with neuroticism (0.91; 95% CI = 0.87-0.96). Socio-demographic variables did not appear to modify the associations between personality and smoking. Adult smokers have higher extraversion, higher neuroticism and lower conscientiousness personality scores than non-smokers. Initiation into smoking is associated positively with higher extraversion and lower conscientiousness, while relapse to smoking among ex-smokers is associated with higher neuroticism. © 2015 Society for the Study of Addiction.

Subject Headings: [Index Medicus](#)

Source: Medline

5. Examining the profile of high-potency cannabis and its association with severity of cannabis dependence.

Citation: Psychological medicine, Nov 2015, vol. 45, no. 15, p. 3181-3189 (November 2015)

Author(s): Freeman, T P; Winstock, A R

Abstract: Cannabis use is decreasing in England and Wales, while demand for cannabis treatment in addiction services continues to rise. This could be partly due to an increased availability of high-potency cannabis. Adults residing in the UK were questioned about their drug use, including three types of cannabis (high potency: skunk; low potency: other grass, resin). Cannabis types were profiled and examined for possible associations between frequency of use and (i) cannabis dependence, (ii) cannabis-related concerns. Frequent use of high-potency cannabis predicted a greater severity of dependence [days of skunk use per month: $b = 0.254$, 95% confidence interval (CI) 0.161-0.357, $p < 0.001$] and this effect became stronger as age decreased ($b = -0.006$, 95% CI -0.010 to -0.002, $p = 0.004$). By contrast, use of low-potency cannabis was not associated with dependence (days of other grass use per month: $b = 0.020$, 95% CI -0.029 to 0.070, $p = 0.436$; days of resin use per month: $b = 0.025$, 95% CI -0.019 to 0.067, $p = 0.245$). Frequency of cannabis use (all types) did not predict severity of cannabis-related concerns. High-potency cannabis was clearly distinct from low-potency varieties by its marked effects on memory and paranoia. It also produced the best high, was preferred, and most available. High-potency cannabis use is associated with an increased severity of dependence, especially in young people. Its profile is strongly defined by negative effects (memory, paranoia), but also positive characteristics (best high, preferred type), which may be important when considering clinical or public health interventions focusing on cannabis potency.

Subject Headings: [Index Medicus](#)

Source: Medline

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

6. Changes in the rate of nicotine metabolism across pregnancy: a longitudinal study.

Citation: Addiction (Abingdon, England), Nov 2015, vol. 110, no. 11, p. 1827-1832 (November 2015)

Author(s): Bowker, Katharine; Lewis, Sarah; Coleman, Tim; Cooper, Sue

Abstract: Increased nicotine metabolism during pregnancy could explain why nicotine replacement therapy (NRT) appears to be less effective on smoking cessation in pregnancy than in

non-pregnant smokers, but little is known about nicotine metabolism across pregnancy. This study was conducted to determine when changes in nicotine metabolism occur during pregnancy and to describe the magnitude of these changes. Longitudinal cohort study of pregnant smokers' nicotine metabolite ratio (NMR). 101 pregnant smokers recruited from hospital antenatal clinics in Nottingham, UK were asked to provide saliva samples at 8-14 weeks (n = 98), 18-22 weeks (n = 65), 32-36 weeks gestation (n = 47), 4 weeks postpartum (n = 44) and 12 weeks postpartum (n = 47). Nicotine metabolite ratio (NMR) was measured using the ratio of cotinine to its primary metabolite trans-3'-hydroxycotinine. Multi-level modelling was used to detect any overall difference in NMR between time points. The 12 week postpartum NMR was compared with the NMRs collected antenatally and 4 weeks postpartum. NMR changed over time (p = 0.0006). Compared with NMR at 12 weeks postpartum, NMR was significantly higher at 18-22 weeks (26% higher, 95% CI 12% to 38%) and 32-36 weeks (23% higher, 95% CI 9% to 35%). There was no significant difference between the 8-14 weeks gestation or 4 weeks postpartum NMR and 12 weeks postpartum. Nicotine metabolism appears to be faster during pregnancy; this faster metabolism is apparent from 18 to 22 weeks of pregnancy and appears to fall by 4 weeks after childbirth. © 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

7. Prescribing opioid analgesics for chronic non-malignant pain in general practice - a survey of attitudes and practice.

Citation: British journal of pain, Nov 2015, vol. 9, no. 4, p. 225-232, 2049-4637 (November 2015)

Author(s): Blake, Holly; Leighton, Paul; van der Walt, Gerrie; Ravenscroft, Andrew

Abstract: This study replicates a previous postal survey of general practitioners (GPs) to explore whether attitudes to opioid prescribing have changed at a time when the number of opioid prescriptions issued in primary care has increased. With permission, a 57-item survey instrument previously utilised with GPs in the South-west of England was circulated to 214 GPs in city-centre practices in the East Midlands. The survey instrument included items relating to practice context, prescribing patterns and attitudes about analgesic medication, perceived prescribing frequency and reluctance to prescribe. Responses were received from 94 GPs (45%). Almost three-quarters (72.7%) of GPs reported that they sometimes or frequently prescribed strong opioids for chronic non-cancer pain. Over two-thirds (67.8%) reported that they were sometimes or frequently reluctant to prescribe strong opioids for chronic non-cancer pain. No significant relationships were observed between perceived frequency of prescribing and a range of demographic factors; however, concerns about 'physical dependence', 'long-term commitment to prescribing' and 'media reports' were associated with less frequent reported prescribing of, and greater reluctance to prescribe, strong opioids. Given the national trend for increased opioid prescriptions, it is unsurprising that more frequent self-reported prescribing is reported here; however, increased frequency does not translate into less reluctance about prescribing. The effectiveness of strong opioids for chronic pain is recognised, but concerns about addiction, dependence and misuse inform a reluctance to use strong opioids. These juxtapositions highlight a continued need for clearer understanding of GPs' perceptions of strong opioids and point to the potential benefit of dedicated guidelines or specialist education and training to address their uncertainties.

Subject Headings:

Source: Medline

Full Text: Available from *Highwire Press* in [British Journal of Pain](#)
Available from *Highwire Press* in [British Journal of Pain](#)

8. Alterations of neuronal precursor cells in stages of human adult neurogenesis in heroin addicts.

Citation: Drug and alcohol dependence, Nov 2015, vol. 156, p. 139-149 (November 1, 2015)

- Author(s):** Bayer, Ronny; Franke, Heike; Ficker, Christoph; Richter, Monique; Lessig, Rüdiger; Büttner, Andreas; Weber, Marco
- Abstract:** Adult neurogenesis has been shown to occur throughout life and different brain pathologies were demonstrated to be associated with altered neurogenesis. Here, an impact of heroin addiction on neurogenesis in humans is hypothesised. Post mortem hippocampal specimens of drug addicts with known heroin abuse and a group of non-addictive control subjects were analysed, using antibodies indicating different stages of neurogenesis. The subgranular zone of the dentate gyrus was examined qualitatively and quantitatively. The data indicate (i) a decreased number of neural precursor cells, (ii) accompanied by low rates of proliferation and (iii) a marked loss of dendritic trees in targeting cells in heroin fatalities. (iv) The age-dependent increase of differentiating cells in the healthy controls was not observed in the addicts. Additionally, double immunofluorescence labelling indicated the precursor nature of Musashi-1 positive cells in the human subgranular zone of the dentate gyrus. Present data firstly demonstrate the influence of drug addiction with known heroin abuse on different developmental stages of progenitors in the dentate gyrus. The patterns of antibody staining suggest a distinct inhibition of neurogenesis at the stage of neural precursor cells and revealed morphological changes in targeting cells in cases of heroin addicts as compared to healthy controls. These alterations could be considerable for memory and cognitive deficits as well as addictive behaviour in chronic drug abusers and may give rise to specific pro-neurogenic therapies. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.
- Subject Headings:** [Index Medicus](#)
- Source:** Medline
- Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

9. Jurisdictional differences in opioid use, other licit and illicit drug use, and harms associated with substance use among people who tamper with pharmaceutical opioids.

- Citation:** Drug and alcohol review, Nov 2015, vol. 34, no. 6, p. 611-622 (November 2015)
- Author(s):** Peacock, Amy; Bruno, Raimondo; Cama, Elena; Kihlas, Ivana; Larance, Briony; Lintzeris, Nick; Hordern, Antonia; White, Nancy; Ali, Robert; Degenhardt, Louisa
- Abstract:** The harms associated with non-medical use of pharmaceutical opioid analgesics are well established; however, less is known about the characteristics and drug-use patterns of the growing and hidden populations of people using pharmaceutical opioids illicitly, including the frequency of pharmaceutical opioid injection. This paper aimed to undertake a detailed examination of jurisdictional differences in patterns of opioid use among a cohort of people who regularly tamper with pharmaceutical opioids in Australia. Data were drawn from the National Opioid Medications Abuse Deterrence study. The cohort was recruited from New South Wales (NSW; n = 303), South Australia (SA; n = 150) and Tasmania (TAS; n = 153) to participate in face-to-face structured interviews collecting data on use of pharmaceutical opioids, benzodiazepines, other sedative drugs and illicit substances, as well as the harms associated with substance use. TAS participants reported greater use and injection of certain pharmaceutical opioids (particularly morphine and methadone tablets), and limited heroin use, with lower rates of engagement in opioid substitution treatment, compared with NSW participants. NSW participants were more socially disadvantaged and more likely to report risky injecting behaviours and injecting-related injuries and diseases compared with SA and TAS participants. SA participants reported greater rates of pain conditions, greater use of pain-based services, as well as broader use of pharmaceutical opioids in regards to forms and route of administration, compared with NSW participants. Distinct jurisdictional profiles were evident for people who tamper with pharmaceutical opioids, potentially reflecting jurisdictional differences in prescribing regulatory mechanisms and addiction treatment models [Peacock A, Bruno R, Cama E, Kihlas I, Larance B, Lintzeris N, Hordern A, White N, Ali R, Degenhardt L. Jurisdictional differences in opioid use, other licit and illicit drug use, and harms associated with substance use among people who tamper with pharmaceutical opioids. *Drug Alcohol Rev* 2015;34:611-22]. © 2015 Australasian Professional Society on Alcohol and other Drugs.

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

10. Wheel running exercise attenuates vulnerability to self-administer nicotine in rats.

Citation: Drug and alcohol dependence, Nov 2015, vol. 156, p. 193-198 (November 1, 2015)
Author(s): Sanchez, Victoria; Lycas, Matthew D; Lynch, Wendy J; Brunzell, Darlene H
Abstract: Preventing or postponing tobacco use initiation could greatly reduce the number of tobacco-related deaths. While evidence suggests that exercise is a promising treatment for tobacco addiction, it is not clear whether exercise could prevent initial vulnerability to tobacco use. Thus, using an animal model, we examined whether exercise attenuates vulnerability to the use and reinforcing effects of nicotine, the primary addictive chemical in tobacco. Initial vulnerability was assessed using an acquisition procedure wherein exercising (unlocked running wheel, n=10) and sedentary (locked or no wheel, n=12) male adolescent rats had access to nicotine infusions (0.01-mg/kg) during daily 21.5-h sessions beginning on postnatal day 30. Exercise/sedentary sessions (2-h/day) were conducted prior to each of the acquisition sessions. The effects of exercise on nicotine's reinforcing effects were further assessed in separate groups of exercising (unlocked wheel, n=7) and sedentary (no wheel, n=5) rats responding for nicotine under a progressive-ratio schedule with exercise/sedentary sessions (2-h/day) conducted before the daily progressive-ratio sessions. While high rates of acquisition of nicotine self-administration were observed among both groups of sedentary controls, acquisition was robustly attenuated in the exercise group with only 20% of exercising rats meeting the acquisition criterion within the 16-day testing period as compared to 67% of the sedentary controls. Exercise also decreased progressive-ratio responding for nicotine as compared to baseline and to sedentary controls. Exercise may effectively prevent the initiation of nicotine use in adolescents by reducing the reinforcing effects of nicotine. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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11. Do consumers substitute opium for hashish? An economic analysis of simultaneous cannabinoid and opiate consumption in a legal regime.

Citation: Drug and alcohol dependence, Nov 2015, vol. 156, p. 170-175 (November 1, 2015)
Author(s): Chandra, Siddharth; Chandra, Madhur
Abstract: To analyze interrelationships in the consumption of opiates and cannabinoids in a legal regime and, specifically, whether consumers of opiates and cannabinoids treat them as substitutes for each other. Econometric dynamic panel data models for opium consumption are estimated using the generalized method of moments (GMM). A unique dataset containing information about opiate (opium) consumption from the Punjab province of British India for the years 1907-1918 is analyzed (n=252) as a function of its own price, the prices of two forms of cannabis (the leaf (bhang), and the resin (charas, or hashish)), and wage income. Cross-price elasticities are examined to reveal substitution or complementarity between opium and cannabis. Opium is a substitute for charas (or hashish), with a cross price elasticity (β^3) of 0.14 ($p < 0.05$), but not for bhang (cannabis leaves; cross price elasticity=0.00, $p > 0.10$). Opium consumption ($\beta^1=0.47$ to 0.49, $p < 0.01$) shows properties of habit persistence consistent with addiction. The consumption of opium is slightly responsive (inelastic) to changes in its own price ($\beta^2=-0.34$ to -0.35, $p < 0.05$ to 0.01) and consumer wages ($\beta^1=0.15$, $p < 0.05$). Opium and hashish, a form of cannabis, are substitutes. In addition, opium consumption displays properties of habit persistence and slight price and wage income responsiveness (inelasticity) consistent with an addictive substance. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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12. Item banks for substance use from the Patient-Reported Outcomes Measurement Information System (PROMIS®): Severity of use and positive appeal of use.

Citation: Drug and alcohol dependence, Nov 2015, vol. 156, p. 184-192 (November 1, 2015)
Author(s): Pilkonis, Paul A; Yu, Lan; Dodds, Nathan E; Johnston, Kelly L; Lawrence, Suzanne M; Hilton, Thomas F; Daley, Dennis C; Patkar, Ashwin A; McCarty, Dennis
Abstract: Two item banks for substance use were developed as part of the Patient-Reported Outcomes Measurement Information System (PROMIS®): severity of substance use and positive appeal of substance use. Qualitative item analysis (including focus groups, cognitive interviewing, expert review, and item revision) reduced an initial pool of more than 5300 items for substance use to 119 items included in field testing. Items were written in a first-person, past-tense format, with 5 response options reflecting frequency or severity. Both 30-day and 3-month time frames were tested. The calibration sample of 1336 respondents included 875 individuals from the general population (ascertained through an internet panel) and 461 patients from addiction treatment centers participating in the National Drug Abuse Treatment Clinical Trials Network. Final banks of 37 and 18 items were calibrated for severity of substance use and positive appeal of substance use, respectively, using the two-parameter graded response model from item response theory (IRT). Initial calibrations were similar for the 30-day and 3-month time frames, and final calibrations used data combined across the time frames, making the items applicable with either interval. Seven-item static short forms were also developed from each item bank. Test information curves showed that the PROMIS item banks provided substantial information in a broad range of severity, making them suitable for treatment, observational, and epidemiological research in both clinical and community settings. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

Subject Headings: [Index Medicus](#)

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

13. Varenicline decreases nicotine but not alcohol self-administration in genetically selected Marchigian Sardinian alcohol-preferring (msP) rats.

Citation: Drug and alcohol dependence, Nov 2015, vol. 156, p. 126-132 (November 1, 2015)
Author(s): Scuppa, Giulia; Cippitelli, Andrea; Toll, Lawrence; Ciccocioppo, Roberto; Ubaldi, Massimo
Abstract: Alcohol and nicotine are largely co-abused. Here, we investigated whether concurrent exposure to both addictive drugs influences each other's consumption and whether varenicline attenuates alcohol consumption in the presence of nicotine. Marchigian Sardinian alcohol-preferring (msP) rats trained to simultaneously self-administer oral alcohol (10% v/v) and intravenous nicotine (30µg/kg/inf) were used. Additional groups of rats were trained to self-administer either alcohol or nicotine. Further, msP rats were also trained to self-administer nicotine followed by 22-h/day access to alcohol and water in a two bottle free choice paradigm or water alone. The effects of varenicline (0.0, 0.3, 1.0, 3.0mg/kg, p.o.) on alcohol and nicotine consumption were tested. In a self-administration paradigm, msP rats showed a significantly high level of alcohol and nicotine intake when the drugs were administered alone. However, when access to both drugs occurred concomitantly, the number of nicotine infusions self-administered was significantly decreased. Nicotine self-administration was markedly reduced by varenicline regardless of whether it was self-administered alone or concurrently with alcohol. In a two bottle choice test, varenicline significantly decreased nicotine self-administration but had no influence on alcohol consumption. Varenicline is highly efficacious in decreasing nicotine self-administration either alone or in combination with alcohol. However, varenicline failed to influence both operant responding for alcohol and home-cage alcohol drinking in msP animals. Taken together, our findings suggest that the effects of varenicline could be

specific to nicotine under conditions where excessive alcohol drinking is facilitated by genetic factors as in msP rats. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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

14. Prescription of opioid analgesics for nontraumatic dental conditions in emergency departments.

Citation: Drug and alcohol dependence, Nov 2015, vol. 156, p. 261-266 (November 1, 2015)
Author(s): Okunseri, Christopher; Dionne, Raymond A; Gordon, Sharon M; Okunseri, Elaye; Szabo, Aniko
Abstract: Opioid analgesics prescribed for nontraumatic dental conditions (NTDCs) by emergency physicians continue to receive attention because of the associated potential for misuse, abuse and addiction. This study examined rates of prescription of opioid analgesics and types of opioid analgesics prescribed for NTDC visits in U.S. emergency departments. Data from the National Hospital Ambulatory Medical Care Survey from 2007 to 2010 were analyzed. Descriptive statistics and logistic regression analysis were performed and adjusted for the survey design. NTDCs made up 1.7% of all ED visits from 2007 to 2010. The prescription of opioid analgesics was 50.3% for NTDC and 14.8% for non-NTDC visits. The overall rate of opioid analgesics prescribed for NTDCs remained fairly stable from 2007 through 2010. Prescription of opioids was highest among patients aged 19-33 years (56.8%), self-paying (57.1%), and non-Hispanic Whites (53.2%). The probability of being prescribed hydrocodone was highest among uninsured patients (68.7%) and for oxycodone, it was highest among private insurance patients (33.6%). Compared to 34-52 year olds, children 0-4 years were significantly more likely to be prescribed codeine and less likely to be prescribed oxycodone. Compared to non-Hispanic Whites, non-Hispanic Blacks had significantly higher odds of been prescribed codeine and somewhat lower odds of been prescribed oxycodone, but it was not statistically significant. There was no significant change in the rates of opioid analgesics prescribed over time for NTDC visits to EDs. Age, payer type and race/ethnicity were significant predictors for the prescription of different opioid analgesics by emergency physicians for NTDC visits. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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

15. Association between morningness/eveningness, addiction severity and psychiatric disorders among individuals with addictions.

Citation: Psychiatry research, Oct 2015, vol. 229, no. 3, p. 1024-1030 (October 30, 2015)
Author(s): Kervran, Charlotte; Fatséas, Méline; Serre, Fuschia; Taillard, Jacques; Beltran, Virginie; Leboucher, Juliette; Debrabant, Romain; Alexandre, Jean-Marc; Daulouède, Jean-Pierre; Philip, Pierre; Auriacombe, Marc
Abstract: Studies have shown that Evening-Type (ET) subjects used more stimulating and sedative substances, and presented more psychiatric disorders than Morning-Type (MT) subject. However, there is a lack of data on the chronotype of patients with addiction. The aim of our study was to describe chronotype and associated factors in a sample of outpatients beginning treatment for addiction. Subjects were assessed with the Morningness-Eveningness questionnaire of Hörne & Ostberg, the Addiction Severity Index and the Mini International Neuropsychiatric Interview. In the 333 subjects with an addiction, 20% were MT and 32% were ET. When comparing ET to MT, multivariate analysis showed that ET was significantly associated with poly-problematic addiction, non-substance addictions, cannabis addiction, and mood disorders, but not with severity of addiction. MT was associated with antisocial personality disorder. Results suggested that chronotype was associated with specific addiction pattern and psychiatric disorders. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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16. History of sexual, emotional or physical abuse and psychiatric comorbidity in substance-dependent patients.

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Author(s): Daigre, Constanza; Rodríguez-Cintas, Laia; Tarifa, Núria; Rodríguez-Martos, Lola; Grau-López, Lara; Berenguer, Marta; Casas, Miguel; Roncero, Carlos
Abstract: Sexual, emotional or physical abuse history is a risk factor for mental disorders in addicted patients. However, the relationship between addiction and abuse lifespan is not well known. This study aims to compare clinical and psychopathological features of addicted patients according to the experience of abuse and to the number of different types of abuse suffered. Bivariate and multivariate analyses were conducted. 512 addicted patients seeking treatment were included, 45.9% reported abuse throughout life (38.9% emotional, 22.3% physical and 13.5% sexual abuse). It was found that female gender; depressive symptoms and borderline personality disorder were independently associated with history of any abuse throughout life. As well, it was found that 14% have been suffered from all three types of abuse (sexual, emotional and physical), 34.5% from two and 55.5% from one type. Female gender and borderline personality disorder were independently associated independently with a greater number of different types of abuse. Results suggest that history of abuse is frequent among substance-dependent patients and these experiences are more prevalent in women and are associated with more psychiatric comorbidity. Copyright © 2015 Elsevier Ireland Ltd. All rights reserved.

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