

Search Results

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Search History

1. MEDLINE; exp SUBSTANCE-RELATED DISORDERS/; 190082 results.
2. MEDLINE; addict*.ti,ab; 30846 results.
3. MEDLINE; 1 OR 2; 200293 results.
4. MEDLINE; exp GREAT BRITAIN/; 259597 results.
5. MEDLINE; "United Kingdom".ti,ab; 19970 results.
6. MEDLINE; "Great Britain".ti,ab; 5453 results.
7. MEDLINE; "England".ti,ab; 25898 results.
8. MEDLINE; "Scotland".ti,ab; 9718 results.
9. MEDLINE; "Wales".ti,ab; 13517 results.
10. MEDLINE; UK.ti,ab; 48994 results.
11. MEDLINE; GB.ti,ab; 5203 results.
12. MEDLINE; ireland.ti,ab; 18758 results.
13. MEDLINE; IRELAND/; 10223 results.
14. MEDLINE; "British Isles".ti,ab; 627 results.
15. MEDLINE; "Channel islands".ti,ab; 78 results.
16. MEDLINE; 4 OR 5 OR 6 OR 7 OR 8 OR 9 OR 10 OR 11 OR 12 OR 13 OR 14 OR 15; 334744 results.
17. MEDLINE; 3 AND 16; 6079 results.

1. Use of the Alcohol Use Disorders Identification Test (AUDIT) to determine the prevalence of alcohol misuse among HIV-infected individuals.

Citation:	International Journal of STD & AIDS, July 2013, vol./is. 24/7(517-21), 0956-4624;1758-1052 (2013 Jul)
Author(s):	Surah S; Kieran J; O'Dea S; Shiel C; Raffee S; Mulcahy F; Keenan E; Lyons F
Institution:	The GUIDE clinic (Department of Genito-Urinary Medicine & Infectious Diseases), St James's Hospital, James's Street, Dublin 8. saloni_surah@hotmail.com
Language:	English
Abstract:	The aim of the paper is to evaluate alcohol misuse among an inner city adult HIV clinic population with AUDIT (Alcohol Use Disorders Identification Test). A cross-sectional HIV outpatient clinic analysis between 28 February 2011 and 11 March 2011 was carried out. AUDIT, demographic and clinical data were collected. Univariate analysis was performed to look for the associations between variables. Backward stepwise multivariate analyses were performed on significant variables from the univariate analysis to assess for predictors of alcohol dependence. In total, 111 patients were included (60% uptake of clinic attendees); 66% were men and 26% were hepatitis C virus (HCV) co-infected. The median AUDIT score was 5 (within normal range). Thirty-four 'AUDIT positive' cases were identified: five (4.5%) indicated consumption of hazardous levels of alcohol; 21 (19%) indicated harmful levels of alcohol; and eight (7%) were likely alcohol dependent. Younger age (<40 years old) was significantly associated with AUDIT positivity (P = 0.006). On multivariate analysis younger age (P = 0.045, odds ratio 13.8) and lower level of education (P = 0.006, odds ratio 6.7) were predictive of scores indicative of alcohol dependence (AUDIT >20). In conclusion, younger age and lower educational levels were associated with scores consistent with alcohol dependence. AUDIT was well tolerated and easy to administer in this outpatient HIV clinic population.
Country of Publication:	England
CAS Registry Number:	0 (Anti-HIV Agents)
Publication Type:	Evaluation Studies; Journal Article
Subject Headings:	Adult Age Factors Aged "*Alcohol Drinking/ep [Epidemiology]" "Alcohol Drinking/px [Psychology]" "*Alcohol-Related Disorders/di [Diagnosis]" "*Alcohol-Related Disorders/ep [Epidemiology]" "Alcohol-Related Disorders/px [Psychology]" Ambulatory Care Facilities "Anti-HIV Agents/tu [Therapeutic Use]" CD4 Lymphocyte Count Cross-Sectional Studies Female "HIV Infections/dt [Drug Therapy]" "*HIV Infections/ep [Epidemiology]" "HIV Infections/px [Psychology]" Humans "Ireland/ep [Epidemiology]" Male Mass Screening Middle Aged Multivariate Analysis Prevalence Questionnaires Socioeconomic Factors "Urban Population/sn [Statistics and Numerical Data]"

Viral Load
Young Adult

Source: MEDLINE

2. BMA urges caution over MPs' request to collect data on patients addicted to prescription drugs.

Citation: BMJ, 2013, vol./is. 347/(f7649), 0959-535X;1756-1833 (2013)

Author(s): O'Dowd A

Institution: London.

Language: English

Country of Publication: England

CAS Registry Number: 0 (Prescription Drugs); 0 (Psychotropic Drugs)

Publication Type: News

Subject Headings: "Great Britain/ep [Epidemiology]"
Humans
*Legislation Drug
*Prescription Drugs
Psychotropic Drugs
"*Substance-Related Disorders/ep [Epidemiology]"

Source: MEDLINE

Full Text: Available from *Highwire Press* in *BMJ*
Available from *BMJ* in *Newcomb Library & Information Service*

3. Glucocorticoid receptor expression and sub-cellular localization in dopamine neurons of the rat midbrain.

Citation: Neuroscience Letters, November 2013, vol./is. 556/(191-5), 0304-3940;1872-7972 (2013 Nov 27)

Author(s): Hensleigh E; Pritchard LM

Institution: Department of Psychology, 4505 Maryland Parkway, Box 455030, University of Nevada Las Vegas, Las Vegas, NV, USA. Electronic address: Emily.Hensleigh@unlv.edu.

Language: English

Abstract: Stress plays an important role in the development of addiction. Animals subjected to stress exhibit sensitized responses to psychostimulant drugs, and this sensitized response is associated with functional adaptations of the mesolimbic dopamine system. These adaptations likely arise from direct or indirect effects of glucocorticoids on dopaminergic neurons. Though glucocorticoid receptor expression in midbrain dopaminergic neurons has been examined in previous studies, results have been somewhat equivocal. We sought to clarify this issue by analyzing tyrosine hydroxylase (TH) and glucocorticoid receptor (GR) co-localization in the rat midbrain by dual fluorescence immunohistochemistry. We also examined sub-cellular localization of the GR in rat midbrain neurons after acute restraint stress. Adult Long-Evans rats were sacrificed 0, 30, 60 or 120min after 30min of restraint stress. A control group did not undergo restraint. Blood samples were collected immediately before and after restraint for measurement of plasma corticosterone by enzyme immunoassay. Glucocorticoid receptors were observed in dopaminergic neurons in both the substantia nigra (SN) and ventral tegmental area (VTA). The degree of co-localization of TH and GR did not differ between the VTA and the SN. All animals subjected to stress exhibited significant increases in plasma corticosterone. Significant translocation of GR signal to cell nuclei was observed after restraint in the SN, but not in the VTA. These results suggest that stress-induced glucocorticoid secretion could trigger functional changes in the mesolimbic dopamine system by direct activation of glucocorticoid receptors in dopaminergic neurons. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Receptors, Glucocorticoid); EC 1-14-16-2 (Tyrosine 3-Monooxygenase); W980KJ009P (Corticosterone)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Animals](#)
[Cell Count](#)
["Corticosterone/bl \[Blood\]"](#)
["*Dopaminergic Neurons/me \[Metabolism\]"](#)
[Male](#)
["Mesencephalon/cy \[Cytology\]"](#)
["*Mesencephalon/me \[Metabolism\]"](#)
[Rats](#)
[Rats Long-Evans](#)
["*Receptors Glucocorticoid/me \[Metabolism\]"](#)
["Tyrosine 3-Monooxygenase/me \[Metabolism\]"](#)

Source: MEDLINE

4. Variations in prison mental health services in England and Wales.

Citation: International Journal of Law & Psychiatry, May 2013, vol./is. 36/3-4(326-32), 0160-2527;1873-6386 (2013 May-Aug)

Author(s): Forrester A; Exworthy T; Olumoroti O; Sessay M; Parrott J; Spencer SJ; Whyte S

Institution: Department of Forensic and Neurodevelopmental Science, Institute of Psychiatry, King's College London, De Crespigny Park, London SE5 8AF, UK. andrew.forrester1@nhs.net

Language: English

Abstract: In responding to high levels of psychiatric morbidity amongst prisoners and recognising earlier poor quality prison mental health care, prison mental health in-reach teams have been established in England and Wales over the last decade. They are mostly provided by the National Health Service (NHS), which provides the majority of UK healthcare services. Over the same period, the prison population has grown to record levels, such that prisons in England and Wales now contain almost 90,000 of the world's overall prison population of over 10 million people (roughly the size of Paris or Istanbul). This study provides an overview of mental health in-reach services in prisons in England and Wales, including variations between them, through a telephone survey of senior staff in all prisons and young offender institutions in England and Wales. 73% of prisons took part; of them 13% had no in-reach team at all (usually low security establishments) and the majority of services were run by NHS teams, usually according to a generic community mental health team (CMHT) model rather than other specialist models. Team size was unrelated to prison size. Each nurse covered around 500 prisoners, each doctor over 3700. Many provided few or no healthcare cells and 24-h psychiatric cover (including on-call cover) was uncommon. Despite developments in recent years, mental health in-reach services still fall short of community equivalence and there is wide variation in service arrangements that cannot be explained by prison size or function. The aim of community equivalence has not yet been reached in prison healthcare and a more sophisticated measure of service improvement and standardisation would now be useful to drive and monitor future development. Copyright 2013 Elsevier Ltd. All rights reserved.

Country of Publication: Netherlands

Publication Type: Journal Article

Subject Headings: [Adolescent](#)
[Adult](#)
[Data Collection](#)
[England](#)
[Female](#)
[Humans](#)
[Male](#)
["Mental Disorders/th \[Therapy\]"](#)
["Mental Health Services/og \[Organization and Administration\]"](#)

"*Mental Health Services/sn [Statistics and Numerical Data]"
 "*Prisons/og [Organization and Administration]"
 "Prisons/sn [Statistics and Numerical Data]"
 "Substance-Related Disorders/th [Therapy]"
 Wales
 Young Adult

Source: MEDLINE

5. Assessment and treatment of hepatitis C virus infection among people who inject drugs in the opioid substitution setting: ETHOS study.

Citation: Clinical Infectious Diseases, August 2013, vol./is. 57 Suppl 2/(S62-9), 1058-4838;1537-6591 (2013 Aug)

Author(s): Alavi M; Grebely J; Micallef M; Dunlop AJ; Balcomb AC; Day CA; Treloar C; Bath N; Haber PS; Dore GJ; Enhancing Treatment for Hepatitis C in Opioid Substitution Settings (ETHOS) Study Group

Institution: The Kirby Institute, University of New South Wales, Sydney, Australia. msalehialavi@kirby.unsw.edu.au

Language: English

Abstract: BACKGROUND: Access to hepatitis C virus (HCV) treatment remains extremely limited among people who inject drugs (PWID). HCV assessment and treatment was evaluated through an innovative model for the provision of HCV care among PWID with chronic HCV infection.METHODS: Enhancing Treatment for Hepatitis C in Opioid Substitution Settings (ETHOS) was a prospective observational cohort. Recruitment was through 5 opioid substitution treatment (OST) clinics, 2 community health centers, and 1 Aboriginal community controlled health organization in New South Wales, Australia.RESULTS: Among 387 enrolled participants, mean age was 41 years, 71% were male, and 15% were of Aboriginal ethnicity. Specialist assessment was undertaken in 191 (49%) participants, and 84 (22%) commenced interferon-based treatment. In adjusted analysis, HCV specialist assessment was associated with non-Aboriginal ethnicity (adjusted odds ratio [AOR], 4.02; 95% confidence interval [CI], 2.05-7.90), no recent benzodiazepine use (AOR, 2.06; 95% CI, 1.31-3.24), and non-1 HCV genotype (AOR, 2.13; 95% CI, 1.32-3.43). In adjusted analysis, HCV treatment was associated with non-Aboriginal ethnicity (AOR, 4.59; 95% CI, 1.49-14.12), living with the support of family and/or friends (AOR, 2.15; 95% CI, 1.25-3.71), never receiving OST (AOR, 4.40; 95% CI, 2.27-8.54), no recent methamphetamine use (AOR, 2.26; 95% CI, 1.12-4.57), and non-1 HCV genotype (AOR, 3.07; 95% CI, 1.67-5.64).CONCLUSIONS: HCV treatment uptake was relatively high among this highly marginalized population of PWID. Potentially modifiable factors associated with treatment include drug use and social support.

Country of Publication: United States

CAS Registry Number: 0 (Antiviral Agents)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
 Adult
 "*Antiviral Agents/tu [Therapeutic Use]"
 Cohort Studies
 Female
 "*Hepatitis C Chronic/dt [Drug Therapy]"
 Humans
 Male
 Middle Aged
 New South Wales
 *Opiate Substitution Treatment
 *Patient Acceptance of Health Care
 Prospective Studies
 "*Substance Abuse Intravenous/co [Complications]"

"*Substance Abuse Intravenous/dt [Drug Therapy]"
Young Adult

Source: MEDLINE

Full Text: Available from *Clinical Infectious Diseases* in *Newcomb Library & Information Service*
Available from *Oxford University Press* in *Clinical Infectious Diseases*

6. Cocaine addiction related reproducible brain regions of abnormal default-mode network functional connectivity: a group ICA study with different model orders.

Citation: Neuroscience Letters, August 2013, vol./is. 548/(110-4), 0304-3940;1872-7972 (2013 Aug 26)

Author(s): Ding X; Lee SW

Institution: Department of Computer Science and Engineering, Korea University, Anam-dong, Seongbuk-ku, Seoul 136-713, Republic of Korea. xyding@image.korea.ac.kr

Language: English

Abstract: Model order selection in group independent component analysis (ICA) has a significant effect on the obtained components. This study investigated the reproducible brain regions of abnormal default-mode network (DMN) functional connectivity related with cocaine addiction through different model order settings in group ICA. Resting-state fMRI data from 24 cocaine addicts and 24 healthy controls were temporally concatenated and processed by group ICA using model orders of 10, 20, 30, 40, and 50, respectively. For each model order, the group ICA approach was repeated 100 times using the ICASSO toolbox and after clustering the obtained components, centrotpe-based anterior and posterior DMN components were selected for further analysis. Individual DMN components were obtained through back-reconstruction and converted to z-score maps. A whole brain mixed effects factorial ANOVA was performed to explore the differences in resting-state DMN functional connectivity between cocaine addicts and healthy controls. The hippocampus, which showed decreased functional connectivity in cocaine addicts for all the tested model orders, might be considered as a reproducible abnormal region in DMN associated with cocaine addiction. This finding suggests that using group ICA to examine the functional connectivity of the hippocampus in the resting-state DMN may provide an additional insight potentially relevant for cocaine-related diagnoses and treatments. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adult
"*Brain/pp [Physiopathology]"
"*Brain Mapping/mt [Methods]"
"*Cocaine-Related Disorders/pp [Physiopathology]"
Computer Simulation
"*Connectome/mt [Methods]"
Female
Humans
Male
*Models Neurological
"*Nerve Net/pp [Physiopathology]"
Principal Component Analysis
Reproducibility of Results
Sensitivity and Specificity

Source: MEDLINE

7. Addiction: lifestyle choice or medical diagnosis?.

Citation: Journal of Evaluation in Clinical Practice, June 2013, vol./is. 19/3(493-6), 1356-1294;1365-2753 (2013 Jun)

Author(s): Nutt D

Institution: Centre for Neuropsychopharmacology, Division of Brain Sciences, Department of Medicine, Hammersmith Hospital, Imperial College, London, UK. d.nutt@imperial.ac.uk

Language: English

Abstract: The concept of addiction is under threat from the current UK government's attempt to define it as a lifestyle choice rather than an illness. This overturns the previous government's rational policy on drug treatment and is both dishonest and damaging. It is dishonest because addiction fulfils all the criteria for an illness. It is damaging because proven treatments for many addictions exist and the failure to optimize these means that more patients will die, get blood-borne viruses, and encourage others into drug use. In this paper, I detail these issues and suggest ways to avoid irreparable damage to the current care provisions that are proving effective. 2013 John Wiley & Sons Ltd.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: ["*Behavior Addictive/px \[Psychology\]"](#)
[*Choice Behavior](#)
[Great Britain](#)
[Humans](#)
[*Life Style](#)
[Public Policy](#)
["Substance-Related Disorders/di \[Diagnosis\]"](#)
["Substance-Related Disorders/th \[Therapy\]"](#)

Source: MEDLINE

Full Text: Available from *Wiley* in *Journal of Evaluation in Clinical Practice*; Note: ; Collection notes: Offsite access: Type "Homerton" into box entitled "Institution Name" at lower right of the screen and select "Homerton Hospital"

8. A burning issue.

Citation: Nursing Standard, November 2013, vol./is. 28/12(28-9), 0029-6570;0029-6570 (2013 Nov 20-26)

Author(s): Trueland J

Language: English

Abstract: E-cigarettes are popular, but critics say the devices, which contain nicotine but not tobacco, may cause health problems or be addictive. Some nurses view them as valuable anti-smoking tool and are looking forward to e-cigarettes becoming a licensed medicine in 2016.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: [Great Britain](#)
[Humans](#)
["*Smoking Cessation/mt \[Methods\]"](#)

Source: MEDLINE

Full Text: Available from *EBSCOhost* in *Nursing Standard*
 Available from *Nursing Standard* in *Newcomb Library & Information Service*

9. A brighter future.

Citation: Nursing Standard, January 0001, vol./is. 28/9(22-3), 0029-6570;0029-6570 (2013 Oct 30-Nov 5)

Author(s): Dean E

Language: English

Abstract: Women entering prison often have serious physical and mental health problems and history of substance misuse. More healthcare resources are needed but services are improving, with some female offenders now attending rehabilitation courses in the community.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: Female
Great Britain
*Health Status
Humans
*Prisoners
"Substance-Related Disorders/rh [Rehabilitation]"

Source: MEDLINE

Full Text: Available from *EBSCOhost* in *Nursing Standard*
Available from *Nursing Standard* in *Newcomb Library & Information Service*

10. Management of opioid addiction in primary care: a pragmatic approach prioritising wellbeing not ideology.

Citation: British Journal of General Practice, May 2013, vol./is. 63/610(231-2), 0960-1643;1478-5242 (2013 May)

Author(s): Lawson E

Language: English

Country of Publication: England

Publication Type: Editorial

Subject Headings: Female
Great Britain
"*Hepatitis C/di [Diagnosis]"
"Hepatitis C/pc [Prevention and Control]"
Humans
Male
"*Opioid-Related Disorders/di [Diagnosis]"
"Opioid-Related Disorders/pc [Prevention and Control]"
"Opioid-Related Disorders/rh [Rehabilitation]"
*Physician's Practice Patterns
"Primary Health Care/og [Organization and Administration]"
"Primary Health Care/st [Standards]"
"Primary Health Care/td [Trends]"
*Primary Health Care
Quality of Life
Referral and Consultation
Risk Factors
"*Substance Abuse Intravenous/di [Diagnosis]"
"Substance Abuse Intravenous/rh [Rehabilitation]"
"*Venous Thrombosis/di [Diagnosis]"
"Venous Thrombosis/pc [Prevention and Control]"

Source: MEDLINE

Full Text: Available from *Highwire Press* in *British Journal of General Practice*

11. Surveillance and uncertainty: community pharmacy responses to over the counter medicine abuse.

Citation: Health & Social Care in the Community, May 2013, vol./is. 21/3(254-62), 0966-0410;1365-2524 (2013 May)

Author(s): Cooper R

- Institution:** School of Health and Related Research (SchARR), University of Sheffield, Sheffield, UK. richard.cooper@shef.ac.uk
- Language:** English
- Abstract:** The sale of over-the-counter (OTC) medicines from community pharmacies offers important opportunities for members of the public to access medicines and self-treat conditions. They are increasingly recognised, however, as having the potential for abuse and harm despite their perceived relative safety. This study reports on a qualitative study that explored the experiences and views of community pharmacy staff in relation to current practices and concerns, management and support relating to OTC medicine abuse. Semi-structured interviews were undertaken with a purposive sample of ten pharmacists and seven medicines counter assistants in the United Kingdom. Analysis of interviews indicated that a range of medicines was implicated, including opiates, sedative antihistamines, laxatives and decongestants. A surveillance role was apparent for assistants, who placed emphasis on regulations, procedure and monitoring frequency of purchases to manage abuse, with referral on to pharmacists. Frequency of purchase was central to assistants' definition of those suspected of OTC medicine abuse, which pharmacists also utilised as well as a distinction between intentional abuse and unintentional medicine misuse. A lack of information about customers, easy access to, and poor communication between community pharmacies were emergent barriers to pharmacists providing more support. Many appeared uncertain of referral options or how pharmacists could effectively stop the problem of abuse. The commercial environment was a particular concern, in relation to customer expectations, medicine advertising and easy access to different community pharmacies. A key tension emerged between providing medicine supplies that permitted consumer freedom, with the needs of healthcare professionals to understand more about those consumers qua patients. Policy implications include the need for improved knowledge for community pharmacy staff about signposting to relevant services, increased awareness of who might be affected, and a review of how pharmacists can have more information about patients to inform OTC medicine sales. 2013 Blackwell Publishing Ltd.
- Country of Publication:** England
- CAS Registry Number:** 0 (Nonprescription Drugs)
- Publication Type:** Journal Article
- Subject Headings:** [Communication](#)
[Environment](#)
[Female](#)
["Great Britain/ep \[Epidemiology\]"](#)
[Health Knowledge Attitudes Practice](#)
[Humans](#)
[Interviews as Topic](#)
[Male](#)
[*Nonprescription Drugs](#)
[*Pharmacies](#)
[*Pharmacists](#)
[Pharmacists' Aides](#)
[*Professional Role](#)
[Referral and Consultation](#)
["Substance-Related Disorders/di \[Diagnosis\]"](#)
["*Substance-Related Disorders/ep \[Epidemiology\]"](#)
- Source:** MEDLINE
- Full Text:** Available from *Wiley* in *Health and Social Care in the Community*; Note: ; Collection notes: Offsite access: Type "Homerton" into box entitled "Institution Name" at lower right of the screen and select "Homerton Hospital"
- 12. Government policy is damaging people most vulnerable to alcohol misuse, warns leading doctor.**
- Citation:** BMJ, 2013, vol./is. 347/(f7385), 0959-535X;1756-1833 (2013)

Author(s): Wise J
Institution: London.
Language: English
Country of Publication: England
Publication Type: News
Subject Headings: ["*Alcoholic Beverages/ec \[Economics\]"](#)
["Alcoholism/ec \[Economics\]"](#)
["*Alcoholism/pc \[Prevention and Control\]"](#)
[*Commerce](#)
[Great Britain](#)
[*Health Policy](#)
[Humans](#)

Source: MEDLINE
Full Text: Available from *Highwire Press* in *BMJ*
Available from *BMJ* in *Newcomb Library & Information Service*

13. Open drug scenes and drug-related public nuisance: a visual rapid assessment research study in Dublin, Ireland.

Citation: Journal of Ethnicity in Substance Abuse, 2013, vol./is. 12/2(154-78), 1533-2640;1533-2659 (2013)

Author(s): Van Hout MC; Bingham T

Institution: Waterford Institute of Technology, Waterford, Ireland. mcvanhout@wit.ie

Language: English

Abstract: The research was undertaken at a time of increasing public concerns for drug- and alcohol-related public nuisance in the city center of Dublin, Ireland. Rapid Assessment Research was conducted involving qualitative interviewing with drug service users; business, transport, community, voluntary, and statutory stakeholders (n = 61); and an environmental mapping exercise. The interplay between homelessness, loitering, an influx of drug users via city metro systems, transient open drug scenes, street drinking, drug injecting, intimidation, knife crime, and prescribed medication abuse was evident. Potential strategies to address drug and alcohol related public nuisance are advised to include the relocation of treatment services, targeted harm reduction initiatives, urban regeneration, improved community rehabilitation pathways, and heightened policing intensity.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
["*Alcohol-Related Disorders/ep \[Epidemiology\]"](#)
["*Crime/sn \[Statistics and Numerical Data\]"](#)
[Data Collection](#)
["Homeless Persons/sn \[Statistics and Numerical Data\]"](#)
[Humans](#)
["Ireland/ep \[Epidemiology\]"](#)
[Male](#)
["Prescription Drug Misuse/sn \[Statistics and Numerical Data\]"](#)
[Public Opinion](#)
["Substance Abuse Intravenous/ep \[Epidemiology\]"](#)
["*Substance-Related Disorders/ep \[Epidemiology\]"](#)
["Transportation/sn \[Statistics and Numerical Data\]"](#)
["Urban Population/sn \[Statistics and Numerical Data\]"](#)
[Young Adult](#)

Source: MEDLINE

14. Khat: social habit or cultural burden? A survey and review.

Citation: Journal of Ethnicity in Substance Abuse, 2013, vol./is. 12/2(140-53), 1533-2640;1533-2659 (2013)

Author(s): Khatib M; Jarrar Z; Bizrah M; Checinski K

Institution: St. George's, University of London, Cranmer Terrace, London, UK.
manaf_khatib@hotmail.com

Language: English

Abstract: The aim of this article was to investigate the psychological and socioeconomic ramifications of Khat on its users and their communities. A thorough literature review was undertaken and a questionnaire was distributed among a Somali community in South London. From the 62 individuals surveyed, 79% were born in Somalia and 15% in the United Kingdom. Participants were asked to answer specific questions about their Khat use, their attitudes toward Khat use, and its perceived effect on their communities. The harms of Khat use are numerous, although they are not well recognized by its users. Khat's legal status means that it is widely available. Measures to reconsider its legality should be considered given the harm on its users.

Country of Publication: England

Publication Type: Journal Article; Review

Subject Headings: [*Attitude to Health](#)
["Catha/ae \[Adverse Effects\]"](#)
["*Catha/ch \[Chemistry\]"](#)
[Female](#)
[Humans](#)
["London/ep \[Epidemiology\]"](#)
[Male](#)
[Questionnaires](#)
[Socioeconomic Factors](#)
["Somalia/eh \[Ethnology\]"](#)
["*Substance-Related Disorders/ep \[Epidemiology\]"](#)
["Substance-Related Disorders/eh \[Ethnology\]"](#)
["Substance-Related Disorders/px \[Psychology\]"](#)

Source: MEDLINE

15. The lateral habenula is a common target of cocaine and dexamethasone.

Citation: Neuroscience Letters, October 2013, vol./is. 555/(12-7), 0304-3940;1872-7972 (2013 Oct 25)

Author(s): Zhang CX; Zhang H; Xu HY; Li MX; Wang S

Institution: Physiology Department, College of Basic Medicine, Jilin University, Changchun, Jilin 130021, China.

Language: English

Abstract: The lateral habenular nucleus (LHb) receives projections from areas rich in dopaminergic neurons and sends efferent fibers to these areas, suggesting that the LHb has a role in dopaminergic reward-related activity. The LHb is also implicated in multiple stress reactions, including responses to painful stimuli. However, it is unclear whether the LHb facilitates glucocorticoid/cocaine interactions by serving as a common target of both. In this study we investigated the effect of cocaine and dexamethasone (a synthesized glucocorticoid) on pain-related neurons (pain-excitatory and pain-inhibitory). Cocaine treatment effectively increased the firing rate of 89.7% of pain-excitatory neurons (cocaine-up response) and decreased the firing rate of 81.8% of pain-inhibitory neurons (cocaine-down response) in the LHb, suggesting that LHb neurons respond to cocaine via different mechanisms. Dexamethasone enhanced the firing rate of the cocaine-up neurons, while cocaine-down neurons were not influenced, indicating that both drugs may elicit an

electrophysiological response at the same LHb neuron. Effects of either cocaine or dexamethasone alone, or both combined, on FOS expression in the LHb were observed via immunohistochemistry. Single administration of either cocaine or dexamethasone increased the number of FOS-positive neurons in the LHb. Pretreatment with dexamethasone and then cocaine markedly enhanced the number of FOS-positive neurons in the LHb relative to cocaine treatment alone, suggesting that stress and addictive drugs exert a synergistic effect on the LHb. We conclude that the LHb responds to cocaine via more than one mechanism and is a common target of both cocaine and the dexamethasone. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Glucocorticoids); 0 (Proto-Oncogene Proteins c-fos); 7S5I7G3JQL (Dexamethasone); 15Y540LHVR (Cocaine)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: ["Action Potentials/de \[Drug Effects\]"](#)
[Animals](#)
["*Cocaine/pd \[Pharmacology\]"](#)
["*Dexamethasone/pd \[Pharmacology\]"](#)
[Drug Synergism](#)
["*Glucocorticoids/pd \[Pharmacology\]"](#)
["*Habenula/de \[Drug Effects\]"](#)
["Habenula/ph \[Physiology\]"](#)
[Male](#)
["Neurons/de \[Drug Effects\]"](#)
["Neurons/ph \[Physiology\]"](#)
["Proto-Oncogene Proteins c-fos/me \[Metabolism\]"](#)
[Rats](#)
[Rats Wistar](#)

Source: MEDLINE

16. Heterogeneity of compulsive buyers based on impulsivity and compulsivity dimensions: a latent profile analytic approach.

Citation: Psychiatry Research, July 2013, vol./is. 208/2(174-82), 0165-1781;1872-7123 (2013 Jul 30)

Author(s): Yi S

Institution: Department of Marketing & Consumer Studies, University of Guelph, Guelph, Ontario, Canada. syi@uoguelph.ca

Language: English

Abstract: Despite the recognition that compulsive buyers are not one homogenous group, there is a dearth of theory-guided empirical investigation. Furthermore, although compulsivity and impulsivity are used as major psychiatric criteria for diagnosing compulsive buyers, these dimensions have rarely been considered in assessing the heterogeneity issue. We fill this gap by applying the motivation shift model of addiction to compulsive buying and empirically assessing the heterogeneity issue in the bi-dimensional space represented by the buying impulsivity and compulsivity dimensions. These hypotheses were tested with latent profile analysis based on survey data (N=445). Consistent with the hypothesis, we identified the cluster of buyers with high buying compulsivity and impulsivity ("compulsive-impulsive buyers"), the cluster of buyers with low buying compulsivity and high impulsivity ("impulsive excessive buyers"), and the cluster of ordinary buyers. Furthermore, it was found that disparate clusters of buyers exhibit unique dispositional tendencies. Theoretical contributions and policy implications of the findings are discussed as well. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article

Subject Headings: ["*Compulsive Behavior/di \[Diagnosis\]"](#)

Humans
 "*Impulsive Behavior/di [Diagnosis]"
 Models Statistical
 Social Control Informal

Source: MEDLINE

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

17. The effects of exogenous CCK-8 on the acquisition and expression of morphine-induced CPP.

Citation: Neuroscience Letters, February 2012, vol./is. 510/1(24-8), 0304-3940;1872-7972 (2012 Feb 21)

Author(s): Wen D; Cong B; Ma C; Yang S; Yu H; Ni Z; Li S

Institution: Department of Forensic Medicine, Hebei Medical University, Hebei Key Laboratory of Forensic Medicine, Shijiazhuang 050017, PR China.

Language: English

Abstract: Cholecystokinin octapeptide (CCK-8) is the most potent endogenous anti-opioid peptide and regulates a variety of physiological processes. In our previous study, we found that exogenous CCK-8 attenuated naloxone-induced withdrawal symptoms, but the possible regulative effects of CCK-8 on the rewarding effects of morphine were not examined. In the present study, we aimed to determine the exact effects of exogenous CCK-8 at various doses on the rewarding action of morphine by utilizing the unbiased conditioned place preference (CPP) paradigm. We therefore examined the effects of CCK-8 on the acquisition, expression and extinction of morphine-induced CPP and on locomotor activity. The results showed that CCK-8 (0.01-1µg, i.c.v.), administered alone, induced neither CPP nor place aversion, but blocked the acquisition of CPP when administered with 10mg/kg morphine. The highest dose of CCK-8 (1µg) administered before CPP testing increased CPP and, along with lower doses (0.1µg), reduced its extinction. In addition, the highest dose (1µg) of CCK-8 suppressed locomotor activity. Our study provides the first behavioral evidence for the inhibitory effects of exogenous CCK-8 on rewarding activity and reveals significant effects of exogenous CCK-8 on various stages of place preference and the development of opioid dependence. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Analgesics, Opioid); 76I7G6D29C (Morphine); E78ZFF4KQ0 (Reward); M03GIQ7Z6P (Sincalide)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: "*Analgesics Opioid/pd [Pharmacology]"
 Animals
 "Avoidance Learning/de [Drug Effects]"
 "*Conditioning (Psychology)/de [Drug Effects]"
 "*Conditioning (Psychology)/ph [Physiology]"
 Dose-Response Relationship Drug
 "Extinction Psychological/de [Drug Effects]"
 "Extinction Psychological/ph [Physiology]"
 Male
 "*Morphine/pd [Pharmacology]"
 "Motor Activity/de [Drug Effects]"
 "Opioid-Related Disorders/dt [Drug Therapy]"
 "Opioid-Related Disorders/et [Etiology]"
 "Opioid-Related Disorders/pp [Physiopathology]"
 Rats
 Rats Wistar
 Reward
 "Sincalide/ad [Administration and Dosage]"
 "*Sincalide/pd [Pharmacology]"
 "Substance Withdrawal Syndrome/dt [Drug Therapy]"

"Substance Withdrawal Syndrome/et [Etiology]"
 "Substance Withdrawal Syndrome/pp [Physiopathology]"

Source: MEDLINE

18. The next generations of substance misuse expertise: an innovative GP speciality trainee scholarship in the Seven Deanery.

Citation: Education for Primary Care, September 2013, vol./is. 24/6(461-5), 1473-9879;1473-9879 (2013 Sep)

Author(s): Booker M; Vose M

Institution: University of Bristol, UK.

Language: English

Country of Publication: England

Publication Type: Journal Article

Subject Headings: [Certification](#)
[Clinical Competence](#)
 "*General Practice/ed [Education]"
[Great Britain](#)
[Humans](#)
[State Medicine](#)
 "*Substance-Related Disorders/di [Diagnosis]"
 "*Substance-Related Disorders/th [Therapy]"

Source: MEDLINE

19. Smoking mull: a grounded theory model on the dynamics of combined tobacco and cannabis use among adult men.

Citation: Health Promotion Journal of Australia, August 2013, vol./is. 24/2(143-50), 1036-1073;1036-1073 (2013 Aug)

Author(s): Banbury A; Zask A; Carter SM; van Beurden E; Tokley R; Passey M; Copeland J

Institution: Southern Cross University, Lismore, NSW 2480, Australia.

Language: English

Abstract: ISSUE ADDRESSED: Australians' use of cannabis has been increasing. Over a third of Australians (35.4%) have used cannabis at some time in their lives and 10.3% are recent users. Almost two-thirds of cannabis users combine cannabis with tobacco. The aim of this study was to understand the process of mulling - smoking tobacco and cannabis together - using a grounded theory approach.METHODS: Twenty-one in-depth semistructured interviews were conducted with men aged 25-34 and living on the North Coast of New South Wales. Interviews explored participants' smoking practices, histories and cessation attempts.RESULTS: A model describing mulling behaviour and the dynamics of smoking cannabis and tobacco was developed. It provides an explanatory framework that demonstrates the flexibility in smoking practices, including substance substitution - participants changed the type of cannabis they smoked, the amount of tobacco they mixed with it and the devices they used to smoke according to the situations they were in and the effects sought.CONCLUSION: Understanding these dynamic smoking practices and the importance of situations and effects, as well as the specific role of tobacco in mulling, may allow health workers to design more relevant and appropriate interventions. SO WHAT? Combining tobacco with cannabis is the most common way of smoking cannabis in Australia. However, tobacco cessation programmes rarely address cannabis use. Further research to develop evidence-based approaches for mull use would improve cessation outcomes.

Country of Publication: Australia

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)

[Australia](#)
[Behavior](#)
[Emotions](#)
[Employment](#)
[Humans](#)
[Interviews as Topic](#)
[Male](#)
["Marijuana Abuse/ep \[Epidemiology\]"](#)
["Marijuana Smoking/ep \[Epidemiology\]"](#)
["Marijuana Smoking/px \[Psychology\]"](#)
["*Smoking/ep \[Epidemiology\]"](#)
["*Smoking/px \[Psychology\]"](#)
["Smoking Cessation/mt \[Methods\]"](#)
["Tobacco Use Disorder/ep \[Epidemiology\]"](#)

Source: MEDLINE

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

20. Acute infections in intravenous drug users.

Citation: Clinical Medicine, October 2013, vol./is. 13/5(511-3), 1470-2118;1470-2118 (2013 Oct)

Author(s): Lavender TW; McCarron B

Institution: James Cook University Hospital NHS Foundation Trust, Middlesbrough, UK.

Language: English

Country of Publication: England

CAS Registry Number: 0 (Anti-Infective Agents)

Publication Type: Journal Article; Review

Subject Headings: [Acute Disease](#)
["*Anti-Infective Agents/tu \[Therapeutic Use\]"](#)
["Great Britain/ep \[Epidemiology\]"](#)
[Humans](#)
["*Infection/dt \[Drug Therapy\]"](#)
["Infection/ep \[Epidemiology\]"](#)
["*Infection/et \[Etiology\]"](#)
[Risk Factors](#)
["*Substance Abuse Intravenous/co \[Complications\]"](#)
["Substance Abuse Intravenous/ep \[Epidemiology\]"](#)

Source: MEDLINE

Full Text: Available from *Clinical Medicine* in *Newcomb Library & Information Service*

21. Gray matter and white matter abnormalities in online game addiction.

Citation: European Journal of Radiology, August 2013, vol./is. 82/8(1308-12), 0720-048X;1872-7727 (2013 Aug)

Author(s): Weng CB; Qian RB; Fu XM; Lin B; Han XP; Niu CS; Wang YH

Institution: Department of Neurosurgery, Anhui Provincial Hospital Affiliated to Anhui Medical University, 17 Lujiang Road, Hefei, Ahui Province 230001, China. send007@163.com

Language: English

Abstract: Online game addiction (OGA) has attracted greater attention as a serious public mental health issue. However, there are only a few brain magnetic resonance imaging studies on brain structure about OGA. In the current study, we used voxel-based morphometry (VBM) analysis and tract-based spatial statistics (TBSS) to investigate the microstructural changes in OGA and assessed the relationship between these morphology changes and the

Young's Internet Addiction Scale (YIAS) scores within the OGA group. Compared with healthy subjects, OGA individuals showed significant gray matter atrophy in the right orbitofrontal cortex, bilateral insula, and right supplementary motor area. According to TBSS analysis, OGA subjects had significantly reduced FA in the right genu of corpus callosum, bilateral frontal lobe white matter, and right external capsule. Gray matter volumes (GMV) of the right orbitofrontal cortex, bilateral insula and FA values of the right external capsule were significantly positively correlated with the YIAS scores in the OGA subjects. Our findings suggested that microstructure abnormalities of gray and white matter were present in OGA subjects. This finding may provide more insights into the understanding of the underlying neural mechanisms of OGA. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
 "Behavior Addictive/et [Etiology]"
 "Behavior Addictive/pa [Pathology]"
 "*Brain/pa [Pathology]"
 "*Diffusion Tensor Imaging/mt [Methods]"
 Female
 "*Gambling/et [Etiology]"
 "*Gambling/pa [Pathology]"
 Humans
 Male
 "*Nerve Fibers Myelinated/pa [Pathology]"
 "*Neurons/pa [Pathology]"
 Online Systems
 Reproducibility of Results
 Sensitivity and Specificity
 "*Video Games/ae [Adverse Effects]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *European Journal of Radiology*

22. An overview and evaluation of combining an addiction liaison nurse outpatient service with hepatitis C outpatient clinics in Glasgow, Scotland.

Citation: Gastroenterology Nursing, March 2013, vol./is. 36/2(98-104), 1042-895X;1538-9766 (2013 Mar-Apr)

Author(s): Brown J; McPherson A; Benson G

Institution: Glasgow Addiction Service, Glasgow, Scotland.

Language: English

Abstract: A new purpose-built facility for the care of patients with Hepatitis C was opened at Gartnavel General Hospital in Glasgow, Scotland, in 2009, bringing together infectious diseases and gastroenterology disciplines. An addiction liaison nurse outpatient service was established alongside existing Hepatitis C outpatient clinics in October 2010. This service supports staff and patients with Hepatitis C and addiction issues. The purpose of this study was to evaluate the usefulness of combining the Addiction Liaison Nurse outpatient service with the Hepatitis C outpatient clinic. Two methods were used in data collection. A brief questionnaire asking staff their view on the addiction liaison service and addiction issues with regard to Hepatitis C was distributed and completed by personnel assigned to the clinics. Staff were also queried about their view on the number and quality of referrals generated by the addiction liaison clinic. The results from the questionnaire indicate that staff agreed that patients should be abstinent from alcohol and illicit drugs before and during treatment of Hepatitis C. Further research is called for with regard to abstinence from alcohol and drugs before and during Hepatitis C treatment.

Country of Publication: United States

Publication Type: Journal Article; Review

Subject Headings: ["*Ambulatory Care Facilities/og \[Organization and Administration\]"](#)
["*Behavior Addictive/nu \[Nursing\]"](#)
["Behavior Addictive/th \[Therapy\]"](#)
["Gastroenterology/og \[Organization and Administration\]"](#)
[*Gastroenterology](#)
["*Hepatitis C Chronic/nu \[Nursing\]"](#)
["Hepatitis C Chronic/th \[Therapy\]"](#)
["Hospitals Isolation/og \[Organization and Administration\]"](#)
[*Hospitals Isolation](#)
[Humans](#)
["Nursing Evaluation Research/og \[Organization and Administration\]"](#)
[*Nursing Evaluation Research](#)
[Outpatients](#)
[Questionnaires](#)
[Risk Factors](#)
[Scotland](#)

Source: MEDLINE

23. Deletion of circadian gene *Per1* alleviates acute ethanol-induced hepatotoxicity in mice.

Citation: Toxicology, December 2013, vol./is. 314/2-3(193-201), 0300-483X;1879-3185 (2013 Dec 15)

Author(s): Wang T; Yang P; Zhan Y; Xia L; Hua Z; Zhang J

Institution: Center for Molecular Metabolism, Nanjing University of Science & Technology, Nanjing 210094, China. Electronic address: wavetaowang@163.com.

Language: English

Abstract: The severity of ethanol-induced liver injury is associated with oxidative stress and lipid accumulation in the liver. Core circadian clock is known to mediate antioxidative enzyme activity and lipid metabolism. However, the link between circadian clock and ethanol-induced hepatotoxicity remains unclear. Here we showed that extents of acute ethanol-induced liver injury and steatosis in mice exhibit circadian variations consistent with hepatic expression of Period (*Per*) genes. Mice lacking clock gene *Per1* displayed less susceptible to ethanol-induced liver injury, as evidenced by lower serum transaminase activity and less severe histopathological changes. Ethanol-induced lipid peroxidation was alleviated in *Per1*^{-/-} mice. However, *Per1* deletion had no effect on antioxidants depletion caused by ethanol administration. Ethanol-induced triglycerides (TG) accumulation in the serum and liver was significantly decreased in *Per1*^{-/-} mice compared with that in wild-type (WT) mice. Analysis of gene expression in the liver revealed peroxisome proliferators activated receptor-gamma (PPAR) and its target genes related to TG synthesis are remarkably down-regulated in *Per1*^{-/-} mice. HepG2 cells were treated with ethanol at 150 mM for 3 days. *Per1* overexpression augmented lipid accumulation after treatment with ethanol in HepG2 cells, but had no effect on ethanol-induced oxidative stress. Expression of genes related to lipogenesis, including PPAR and its target genes, was up-regulated in cells overexpressing *Per1*. In conclusion, these results indicated that circadian rhythms of ethanol-induced hepatotoxicity are controlled by clock gene *Per1*, and deletion of *Per1* protected mice from ethanol-induced liver injury by decreasing hepatic lipid accumulation. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (*Per1* protein, mouse); 0 (Period Circadian Proteins); 3K9958V90M (Ethanol)

Publication Type: Journal Article

Subject Headings: [Animals](#)
["*Circadian Rhythm/ge \[Genetics\]"](#)
["Ethanol/ad \[Administration and Dosage\]"](#)
["*Ethanol/to \[Toxicity\]"](#)
[*Gene Deletion](#)

Hep G2 Cells
 Humans
 "Lipid Peroxidation/ge [Genetics]"
 "*Liver Diseases Alcoholic/ge [Genetics]"
 "Liver Diseases Alcoholic/me [Metabolism]"
 Male
 Mice
 Mice Inbred C57BL
 Mice Knockout
 "*Period Circadian Proteins/df [Deficiency]"
 "*Period Circadian Proteins/ge [Genetics]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Toxicology*

24. The effect of legal bans on poison control center contacts regarding 'legal highs'.

Citation: Addiction, July 2013, vol./is. 108/7(1348-9), 0965-2140;1360-0443 (2013 Jul)

Author(s): Loeffler G; Craig C

Language: English

Country of Publication: England

CAS Registry Number: 0 (2-(3-methoxyphenyl)-2-(ethylamino)cyclohexanone); 0 (Alkaloids); 0 (Cyclohexanones); 0 (Cyclohexylamines); 0 (Designer Drugs); 0 (Psychotropic Drugs); 0 (Street Drugs); 540EI4406J (cathinone)

Publication Type: Letter

Subject Headings: "Alkaloids/cs [Chemical Synthesis]"
 Cyclohexanones
 Cyclohexylamines
 *Designer Drugs
 Great Britain
 Humans
 *Legislation Drug
 "Poison Control Centers/sn [Statistics and Numerical Data]"
 "Psychotropic Drugs/cs [Chemical Synthesis]"
 "*Street Drugs/lj [Legislation and Jurisprudence]"
 "*Substance-Related Disorders/pc [Prevention and Control]"
 United States

Source: MEDLINE

Full Text: Available from *Wiley* in *Addiction*; Note: ; Collection notes: Offsite access: Type "Homerton" into box entitled "Institution Name" at lower right of the screen and select "Homerton Hospital"

25. Understanding tobacco industry pricing strategy and whether it undermines tobacco tax policy: the example of the UK cigarette market.

Citation: Addiction, July 2013, vol./is. 108/7(1317-26), 0965-2140;1360-0443 (2013 Jul)

Author(s): Gilmore AB; Tavakoly B; Taylor G; Reed H

Institution: Department for Health, University of Bath, Bath, UK. a.gilmore@bath.ac.uk

Language: English

Abstract: AIMS: Tobacco tax increases are the most effective means of reducing tobacco use and inequalities in smoking, but effectiveness depends on transnational tobacco company (TTC) pricing strategies, specifically whether TTCs overshift tax increases (increase prices on top of the tax increase) or undershift the taxes (absorb the tax increases so they are not passed onto consumers), about which little is known. DESIGN: Review of literature on brand segmentation. Analysis of 1999-2009 data to explore the extent to which tax increases are shifted to consumers, if this differs by brand segment and whether

cigarette price indices accurately reflect cigarette prices. SETTING: UK. PARTICIPANTS: UK smokers. MEASUREMENTS: Real cigarette prices, volumes and net-of-tax- revenue by price segment. FINDINGS: TTCs categorise brands into four price segments: premium, economy, mid and 'ultra-low price' (ULP). TTCs have sold ULP brands since 2006; since then, their real price has remained virtually static and market share doubled. The price gap between premium and ULP brands is increasing because the industry differentially shifts tax increases between brand segments; while, on average, taxes are overshifted, taxes on ULP brands are not always fully passed onto consumers (being absorbed at the point each year when tobacco taxes increase). Price indices reflect the price of premium brands only and fail to detect these problems. CONCLUSIONS: Industry-initiated cigarette price changes in the UK appear timed to accentuate the price gap between premium and ULP brands. Increasing the prices of more expensive cigarettes on top of tobacco tax increases should benefit public health, but the growing price gap enables smokers to downtrade to cheaper tobacco products and may explain smoking-related inequalities. Governments must monitor cigarette prices by price segment and consider industry pricing strategies in setting tobacco tax policies. 2013 Society for the Study of Addiction.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't; Review

Subject Headings: ["*Commerce/ec \[Economics\]"](#)
[Costs and Cost Analysis](#)
[Government Regulation](#)
[Great Britain](#)
[Humans](#)
["*Smoking/ec \[Economics\]"](#)
["*Taxes/ec \[Economics\]"](#)
["Taxes/lj \[Legislation and Jurisprudence\]"](#)
["*Tobacco Industry/ec \[Economics\]"](#)
["*Tobacco Products/ec \[Economics\]"](#)

Source: MEDLINE

Full Text: Available from *Wiley* in *Addiction*; Note: ; Collection notes: Offsite access: Type "Homerton" into box entitled "Institution Name" at lower right of the screen and select "Homerton Hospital"

26. Low incidence of hepatitis C virus among prisoners in Scotland.

Citation: *Addiction*, July 2013, vol./is. 108/7(1296-304), 0965-2140;1360-0443 (2013 Jul)

Author(s): Taylor A; Munro A; Allen E; Dunleavy K; Cameron S; Miller L; Hickman M

Institution: School of Social Sciences, University of the West of Scotland, Paisley, Scotland.
 avril.taylor@uws.ac.uk

Language: English

Abstract: AIMS: To estimate hepatitis C virus (HCV) incidence and HCV risk among Scottish prisoners. DESIGN: National sero-behavioural survey; dried blood spots were collected in order to identify recent HCV infections (i.e. HCV antibody-negative and HCV polymerase chain reaction (PCR)-positive). SETTING: All 14 closed prisons in Scotland. PARTICIPANTS: A total of 5187 prisoners responded to the survey (79% of available prisoners on survey days) comprising 5076 individuals (after removing incomplete returns and participants surveyed in more than one prison); 95% men, 32% (1625) reported an injecting history (PWID) and median sentence of 9.5 months. HCV antibody samples were available for 4904 participants; there was sufficient sera for HCV PCR for 2446 prisoners who had been in prison for at least 75 days. MEASUREMENTS: The estimate of in-prison recent infections is based on prisoners incarcerated for a sufficient period, i.e. at least 75 days, so that recent infections could be attributed to prison. FINDINGS: Overall HCV prevalence was 19%; 53% among people who reported an injecting history and 3% among other prisoners. Three recent infections probably acquired in prison were detected. None of the cases reported injecting during their current sentence or any other potential exposure. Estimated incidence was 0.6-0.9% overall and

3.0-4.3% among PWID (assuming all infections acquired through injecting). Fifty-seven per cent (929) of PWID were receiving opiate substitution treatment (OST) at the time of the survey. Of all prisoners, 2.5% and 8% of PWID reported injecting during their current period of incarceration. CONCLUSION: The low incidence of HCV infections in Scottish prisons is due most probably to the low occurrence of in-prison injecting and high coverage of OST. Low HCV risk can be achieved in prisons without necessarily introducing needle exchange programmes, but close monitoring of risk behaviours is essential. If risk increases, provision of needle exchange should be considered. 2013 The Authors, Addiction 2013 Society for the Study of Addiction.

Country of Publication: England

Publication Type: Journal Article; Multicenter Study; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[Cross-Sectional Studies](#)
[Female](#)
["*Hepacivirus/ip \[Isolation and Purification\]"](#)
["*Hepatitis C/ep \[Epidemiology\]"](#)
[Humans](#)
[Incidence](#)
[Male](#)
[Polymerase Chain Reaction](#)
[Prevalence](#)
["*Prisoners/sn \[Statistics and Numerical Data\]"](#)
[Questionnaires](#)
[Risk Factors](#)
[Risk-Taking](#)
["Scotland/ep \[Epidemiology\]"](#)
["*Substance Abuse Intravenous/ep \[Epidemiology\]"](#)
[Young Adult](#)

Source: MEDLINE

Full Text: Available from *Wiley* in *Addiction*; Note: ; Collection notes: Offsite access: Type "Homerton" into box entitled "Institution Name" at lower right of the screen and select "Homerton Hospital"

27. Resting state synchrony in long-term abstinent alcoholics with versus without comorbid drug dependence.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(56-65), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Camchong J; Stenger VA; Fein G

Institution: Neurobehavioral Research, Inc., 1585 Kapiolani Blvd., Honolulu, HI 96814, USA. jcamchong@nbresearch.com

Language: English

Abstract: BACKGROUND: We previously reported that when long-term abstinent alcoholics (LTAA; with no drug comorbidity) are compared to controls, they show increased resting state synchrony (RSS) in the executive control network and reduced RSS in the appetitive drive network suggestive of compensatory mechanisms that may facilitate abstinence. The aim of the present study was to investigate whether long-term abstinent alcoholics with comorbid stimulants dependence (LTAAS) show similar RSS mechanisms. METHODS: Resting-state functional MRI data were collected on 36 LTAAS (20 females, age: 47.85+7.30), 23 LTAA (8 females, age: M=47.91+6.76), and 23 non-substance abusing controls (NSAC; 8 females, age: M=47.99+6.70). Using seed-based measures, we examined RSS with the nucleus accumbens (NAcc) and the subgenual anterior cingulate cortex (sgACC). RESULTS: Results showed commonalities in LTAA and LTAAS RSS (similar enhanced executive control RSS and left insula RSS) as well as differences (no attenuation of appetitive drive RSS in LTAAS and no enhancement of RSS in right insula in LTAA). CONCLUSIONS: We believe these differences are adaptive mechanisms that support abstinence. These findings suggest

common as well as specific targets for treatment in chronic alcoholics with vs without comorbid stimulant dependence. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Comparative Study; Journal Article; Research Support, N.I.H., Extramural

Subject Headings: Adult
 "Alcoholism/ep [Epidemiology]"
 "*Alcoholism/me [Metabolism]"
 "Amphetamine-Related Disorders/ep [Epidemiology]"
 "*Amphetamine-Related Disorders/me [Metabolism]"
 "*Brain/me [Metabolism]"
 "Cocaine-Related Disorders/ep [Epidemiology]"
 "*Cocaine-Related Disorders/me [Metabolism]"
 Comorbidity
 Female
 Humans
 "Magnetic Resonance Imaging/mt [Methods]"
 "Magnetic Resonance Imaging/td [Trends]"
 Male
 Middle Aged
 "*Rest/ph [Physiology]"
 "Substance-Related Disorders/ep [Epidemiology]"
 "Substance-Related Disorders/me [Metabolism]"
 "*Temperance/td [Trends]"
 Time Factors

Source: MEDLINE

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

28. Stigma among health professionals towards patients with substance use disorders and its consequences for healthcare delivery: systematic review.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(23-35), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): van Boekel LC; Brouwers EP; van Weeghel J; Garretsen HF

Institution: Department Tranzo, Tilburg University, Tilburg School of Social and Behavioral Sciences, Tilburg, The Netherlands. L.vanBoekel@tilburguniversity.edu

Language: English

Abstract: BACKGROUND: Healthcare professionals are crucial in the identification and accessibility to treatment for people with substance use disorders. Our objective was to assess health professionals' attitudes towards patients with substance use disorders and examine the consequences of these attitudes on healthcare delivery for these patients in Western countries. METHODS: Pubmed, PsycINFO and Embase were systematically searched for articles published between 2000 and 2011. Studies evaluating health professionals' attitudes towards patients with substance use disorders and consequences of negative attitudes were included. An inclusion criterion was that studies addressed alcohol or illicit drug abuse. Reviews, commentaries and letters were excluded, as were studies originating from non-Western countries. RESULTS: The search process yielded 1562 citations. After selection and quality assessment, 28 studies were included. Health professionals generally had a negative attitude towards patients with substance use disorders. They perceived violence, manipulation, and poor motivation as impeding factors in the healthcare delivery for these patients. Health professionals also lacked adequate education, training and support structures in working with this patient group. Negative attitudes of health professionals diminished patients' feelings of empowerment and subsequent treatment outcomes. Health professionals are less involved and have a more task-oriented approach in the delivery of healthcare, resulting in less personal engagement and diminished empathy. CONCLUSIONS: This review indicates that negative attitudes of health professionals towards patients with substance use disorders are common and contribute to suboptimal health care for these patients. However, few

studies have evaluated the consequences of health professionals' negative attitudes towards patients with substance use disorders. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Review

Subject Headings: *Attitude of Health Personnel
"Delivery of Health Care/mt [Methods]"
*Delivery of Health Care
"*Health Personnel/px [Psychology]"
Humans
*Social Stigma
"*Substance-Related Disorders/px [Psychology]"
"*Substance-Related Disorders/th [Therapy]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

29. Interventions for reducing alcohol consumption among general hospital inpatient heavy alcohol users: a systematic review.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(1-22), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Mdege ND; Fayter D; Watson JM; Stirk L; Sowden A; Godfrey C

Institution: Department of Health Sciences, University of York, Heslington, York, UK.
noreen.mdege@york.ac.uk

Language: English

Abstract: BACKGROUND: There is growing interest in pro-active detection and provision of interventions for heavy alcohol use in the general hospital inpatient population. We aimed to determine, from the available evidence, the effectiveness of interventions in reducing alcohol consumption among general hospital inpatient heavy alcohol users. METHODS: The following databases were searched for completed and on-going randomised and non-randomised controlled studies published up to November 2012: MEDLINE; C2-SPECTR; CINAHL; The Cochrane Library; Conference Proceedings Citation Index: Science; EMBASE; HMIC; PsycInfo; Public Health Interventions Cost Effectiveness Database (PHICED); and ClinicalTrials.gov. Studies were screened independently by two reviewers. Data extraction was performed by one reviewer and independently checked by a second. RESULTS: Twenty-two studies which met the inclusion criteria enrolled 5307 participants in total. All interventions were non-pharmacological and alcohol focused. Results from single session brief interventions and self-help literature showed no clear benefit on alcohol consumption outcomes, with indications of benefit from some studies but not others. However, results suggest brief interventions of more than one session could be beneficial on reducing alcohol consumption, especially for non-dependent patients. No active intervention was found superior over another on alcohol consumption and other outcomes. CONCLUSIONS: Brief interventions of more than one session could be beneficial on reducing alcohol consumption among hospital inpatients, especially for non-dependent patients. However, additional evidence is still needed before more definitive conclusions can be reached. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Review

Subject Headings: "Alcohol Drinking/ep [Epidemiology]"
"*Alcohol Drinking/th [Therapy]"
"Alcoholism/di [Diagnosis]"
"Alcoholism/ep [Epidemiology]"
"*Alcoholism/th [Therapy]"
"Clinical Trials as Topic/mt [Methods]"

"Hospitalization/td [Trends]"
 *Hospitalization
 "*Hospitals General/mt [Methods]"
 "Hospitals General/ut [Utilization]"
 Humans

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

30. Patient characteristics associated with buprenorphine/naloxone treatment outcome for prescription opioid dependence: Results from a multisite study.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(112-8), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Dreifuss JA; Griffin ML; Frost K; Fitzmaurice GM; Potter JS; Fiellin DA; Selzer J; Hatch-Maillette M; Sonne SC; Weiss RD

Institution: Division of Alcohol and Drug Abuse, McLean Hospital, Belmont, MA 02478, USA. jdreifuss@mclean.harvard.edu

Language: English

Abstract: BACKGROUND: Prescription opioid dependence is a growing problem, but little research exists on its treatment, including patient characteristics that predict treatment outcome. METHODS: A secondary analysis of data from a large multisite, randomized clinical trial, the National Drug Abuse Treatment Clinical Trials Network Prescription Opioid Addiction Treatment Study (POATS) was undertaken to examine baseline patient characteristics (N=360) associated with success during 12-week buprenorphine/naloxone treatment for prescription opioid dependence. Baseline predictor variables included self-reported demographic and opioid use history information, diagnoses assessed via the Composite International Diagnostic Interview, and historical opioid use and related information from the Pain And Opiate Analgesic Use History. RESULTS: In bivariate analyses, pre-treatment characteristics associated with successful opioid use outcome included older age, past-year or lifetime diagnosis of major depressive disorder, initially obtaining opioids with a medical prescription to relieve pain, having only used opioids by swallowing or sublingual administration, never having used heroin, using an opioid other than extended-release oxycodone most frequently, and no prior opioid dependence treatment. In multivariate analysis, age, lifetime major depressive disorder, having only used opioids by swallowing or sublingual administration, and receiving no prior opioid dependence treatment remained as significant predictors of successful outcome. CONCLUSIONS: This is the first study to examine characteristics associated with treatment outcome in patients dependent exclusively on prescription opioids. Characteristics associated with successful outcome after 12 weeks of buprenorphine/naloxone treatment include some that have previously been found to predict heroin-dependent patients' response to methadone treatment and some specific to prescription opioid-dependent patients receiving buprenorphine/naloxone. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Analgesics, Opioid); 0 (Prescription Drugs); 36B82AMQ7N (Naloxone); 40D3SCR4GZ (Buprenorphine)

Publication Type: Clinical Trial, Phase I; Clinical Trial, Phase II; Journal Article; Multicenter Study; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: Adult
 "*Analgesics Opioid/tu [Therapeutic Use]"
 "*Buprenorphine/ad [Administration and Dosage]"
 Drug Therapy Combination
 Female
 Humans
 Male
 "*Naloxone/ad [Administration and Dosage]"

"*Opioid-Related Disorders/di [Diagnosis]"
 "*Opioid-Related Disorders/dt [Drug Therapy]"
 "Opioid-Related Disorders/ep [Epidemiology]"
 "*Prescription Drugs/tu [Therapeutic Use]"
 Treatment Outcome
 Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

31. An iterative model for in vitro laboratory assessment of tamper deterrent formulations.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(100-5), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Cone EJ; Giordano J; Weingarten B

Institution: Pinney Associates, Bethesda, MD, USA. Edwardcone@verizon.net

Language: English

Abstract: BACKGROUND: In an effort to address the continuing problem of prescription opioid abuse, manufacturers are incorporating new technologies into formulations that are designed to deter product tampering and misuse. Standards for laboratory assessment of tamper deterrent properties of new formulations have not previously been developed. METHODS: Experimental designs were developed for the in vitro laboratory assessment of the tamper deterrent properties of reformulated oxycodone. Given that an exhaustive study of all potential tampering methods was impractical; this model was developed to evaluate the product in an incremental fashion with iterative changes that were amenable to objective and replicable laboratory testing. RESULTS: A description of the model is provided along with pertinent examples involving assessment of reformulated oxycodone with comparisons to the original formulation. Physical and chemical procedures were developed that relate to "real-world" scenarios that may be applied to opioid formulations. Test results were interpreted in relation to the relative ease or difficulty of the manipulation as compared to control materials and the amount and purity of active drug that could be accessed. Results from some of the tests were designed to be useful in predicting whether specific tampering methods would facilitate or deter drug administration by different routes of administration. CONCLUSIONS: This model, developed to assess the tamper deterrent properties of reformulated oxycodone, should have application in the assessment of other drug formulations designed to exhibit tamper deterrence properties. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: CD35PMG570 (Oxycodone)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: "*Chemistry Pharmaceutical/mt [Methods]"
 Humans
 *Models Chemical
 "*Opioid-Related Disorders/pc [Prevention and Control]"
 "*Oxycodone/ch [Chemistry]"
 Particle Size
 "Substance-Related Disorders/pc [Prevention and Control]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

32. Integrating buprenorphine maintenance therapy into federally qualified health centers: real-world substance abuse treatment outcomes.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(127-35), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Haddad MS; Zelenev A; Altice FL

Institution: Community Health Center, Inc., Middletown, CT, USA. haddadm@chc1.com

Language: English

Abstract: BACKGROUND: Few studies have examined real-world effectiveness of integrated buprenorphine maintenance treatment (BMT) programs in federally qualified health centers (FQHCs).METHODS: Opioid dependent patients (N=266) inducted on buprenorphine between July 2007 and December 2008 were retrospectively assessed at Connecticut's largest FQHC network. Six-month BMT retention and opioid-free time were collected longitudinally from electronic health records; 136 (51.1%) of patients were followed for at least 12 months.RESULTS: Participants had a mean age of 40.1 years, were primarily male (69.2%) and treated by family practitioners (70.3%). Co-morbidity included HCV infection (59.8%), mood disorders (71.8%) and concomitant cocaine use (59%). Retention on BMT was 56.8% at 6 months and 61.6% at 12 months for the subset observed over 1 year. Not being retained on BMT at 12 months was associated with cocaine use (AOR=2.18; 95% CI=1.35-3.50) while prescription of psychiatric medication (AOR=0.36; 95% CI 0.20-0.62) and receiving on-site substance abuse counseling (AOR=0.34; 95% CI 0.19, 0.59) improved retention. Two thirds of the participants experienced at least one BMT gap of 2 or more weeks with a mean gap length of 116.4 days.CONCLUSIONS: Integrating BMT in this large FQHC network resulted in retention rates similarly reported in clinical trials and emphasizes the need for providing substance abuse counseling and screening for and treating psychiatric comorbidity. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 40D3SCR4GZ (Buprenorphine)

Publication Type: Journal Article; Multicenter Study; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
["*Buprenorphine/ad \[Administration and Dosage\]"](#)
[Cohort Studies](#)
["Connecticut/ep \[Epidemiology\]"](#)
[Female](#)
[Humans](#)
[Longitudinal Studies](#)
["*Maintenance Chemotherapy/mt \[Methods\]"](#)
["Maintenance Chemotherapy/td \[Trends\]"](#)
[Male](#)
[Middle Aged](#)
["Opioid-Related Disorders/di \[Diagnosis\]"](#)
["*Opioid-Related Disorders/dt \[Drug Therapy\]"](#)
["*Opioid-Related Disorders/ep \[Epidemiology\]"](#)
["Patient Protection and Affordable Care Act/td \[Trends\]"](#)
[*Patient Protection and Affordable Care Act](#)
[Retrospective Studies](#)
["*Substance Abuse Treatment Centers/mt \[Methods\]"](#)
["Substance Abuse Treatment Centers/td \[Trends\]"](#)
[Treatment Outcome](#)
[Young Adult](#)

Source: MEDLINE

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

33. A randomised controlled trial of sublingual buprenorphine-naloxone film versus tablets in the management of opioid dependence.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(119-26), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Lintzeris N; Leung SY; Dunlop AJ; Larance B; White N; Rivas GR; Holland RM; Degenhardt L; Muhleisen P; Hurley M; Ali R

Institution: Langton Centre, South Eastern Sydney Local Health District, NSW 2010, Australia.
nicholas.lintzeris@sesiahs.health.nsw.gov.au

Language: English

Abstract: BACKGROUND: Buprenorphine-naloxone sublingual film was introduced in 2011 in Australia as an alternative to tablets. This study compared the two formulations on subjective dose effects and equivalence, trough plasma levels, adverse events, patient satisfaction, supervised dosing time, and impact upon treatment outcomes (substance use, psychosocial function).METHODS: 92 buprenorphine-naloxone tablet patients were recruited to this outpatient multi-site double-blind double-dummy parallel group trial. Patients were randomised to either tablets or film, without dose changes, over a 31 day period.RESULTS: No significant group differences were observed for subjective dose effects, trough plasma buprenorphine or norbuprenorphine levels, adverse events and treatment outcomes. Buprenorphine-naloxone film took significantly less time to dissolve than tablets (173+71 versus 242+141s, p=0.007, F=7.67).CONCLUSIONS: The study demonstrated dose equivalence and comparable clinical outcomes between the buprenorphine-naloxone film and tablet preparations, whilst showing improved dispensing times and patient ratings of satisfaction with the film. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Tablets); 36B82AMQ7N (Naloxone); 40D3SCR4GZ (Buprenorphine)

Publication Type: Comparative Study; Journal Article; Multicenter Study; Randomized Controlled Trial; Research Support, Non-U.S. Gov't

Subject Headings: Administration Sublingual
Adult
"*Buprenorphine/ad [Administration and Dosage]"
"*Buprenorphine/bl [Blood]"
Chemistry Pharmaceutical
Disease Management
Dose-Response Relationship Drug
Double-Blind Method
Female
Humans
Male
Middle Aged
"*Naloxone/ad [Administration and Dosage]"
"*Naloxone/bl [Blood]"
"*Opioid-Related Disorders/bl [Blood]"
"*Opioid-Related Disorders/dt [Drug Therapy]"
Tablets
Treatment Outcome

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

34. Probability and predictors of treatment-seeking for prescription opioid use disorders: a national study.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(143-8), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Blanco C; Iza M; Schwartz RP; Rafful C; Wang S; Olsson M

Institution: Department of Psychiatry, New York State Psychiatric Institute/College of Physicians and Surgeons, Columbia University, New York, NY 10032, United States.
cb255@columbia.edu

Language: English

Abstract: BACKGROUND: Prescription opioid use disorders are the second most common drug use disorder behind only cannabis use disorders. Despite this, very little is known about the help-seeking behavior among individuals with these disorders.METHODS: The

sample included respondents of the Wave 2 of the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) with a lifetime diagnosis of prescription drug use disorders (N=623). Unadjusted and adjusted hazard ratios are presented for time to first treatment-seeking by sociodemographic characteristics and comorbid psychiatric disorders. RESULTS: The lifetime cumulative probability of treatment seeking was 42% and the median delay from prescription drug use disorder onset to first treatment was 3.83 years. Having an earlier onset of prescription opioid use disorder and a history of bipolar disorder, major depression disorder, specific phobia and cluster B personality disorders predicted shorter delays to treatment. CONCLUSIONS: Although some comorbid psychiatric disorders increase the rate of treatment-seeking and decrease delays to first-treatment contact rates of treatment-seeking for prescription drug use disorder are low, even when compared with rates of treatment for other substance use disorders. Given the high prevalence and adverse consequences of prescription drug use disorder, there is a need to improve detection and treatment of prescription opioid use disorder. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Analgesics, Opioid); 0 (Prescription Drugs)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adolescent](#)
[Adult](#)
["Analgesics Opioid/ae \[Adverse Effects\]"](#)
[*Analgesics Opioid](#)
[Female](#)
[Humans](#)
[Male](#)
["*Opioid-Related Disorders/ep \[Epidemiology\]"](#)
["Opioid-Related Disorders/px \[Psychology\]"](#)
["*Opioid-Related Disorders/th \[Therapy\]"](#)
["Patient Acceptance of Health Care/px \[Psychology\]"](#)
[*Patient Acceptance of Health Care](#)
[Predictive Value of Tests](#)
["Prescription Drugs/ae \[Adverse Effects\]"](#)
[*Prescription Drugs](#)
[Probability](#)
[Self Report](#)
[Treatment Outcome](#)
["United States/ep \[Epidemiology\]"](#)
[Young Adult](#)

Source: MEDLINE

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

35. The alpha-1 adrenergic antagonist doxazosin for treatment of cocaine dependence: A pilot study.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(66-70), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Shorter D; Lindsay JA; Kosten TR

Institution: The Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, and Michael E. DeBakey V.A. Medical Center, Houston, TX, United States. shorter@bcm.edu

Language: English

Abstract: BACKGROUND: Medications decreasing central noradrenergic activity have been associated with attenuation of cocaine effects. AIMS: This pilot study examined the efficacy of doxazosin versus placebo for reducing cocaine use in treatment-seeking cocaine dependent persons. METHODS: We screened 108 cocaine dependent subjects and assigned 35 participants to receive either doxazosin (8mg/day) or placebo for 13 weeks. Participants were titrated on the study medication according to two different schedules.

During the initial phase of the study, patients were titrated onto the study medication over an 8-week period (DOX-slow). After reviewing data from our human laboratory study, a second phase was initiated, wherein titration was accelerated to a 4-week period (DOX-fast). All participants received weekly cognitive behavioral therapy. Urine toxicology was performed thrice weekly. RESULTS: Baseline subject characteristics were comparable. Thirty subjects entered the study: 8 subjects in DOX-slow, 9 subjects in DOX-fast, and 13 subjects in placebo. Total number of cocaine-negative urines was significantly increased in the DOX-fast group; and percentage of total cocaine-negative urines by group were 10% for DOX-slow group, 35% for DOX-fast group, and 14% for placebo ($\chi^2=36.3$, $df=2$, $p<0.0001$). The percentage of participants achieving two or more consecutive weeks of abstinence by group was 0% for DOX-slow group, 44% for DOX-fast group, and 7% for placebo ($\chi^2=7.35$, $df=2$, $p<0.023$). CONCLUSIONS: This pilot study suggests the potential efficacy of doxazosin when rapidly titrated in reducing cocaine use. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

CAS Registry Number: 0 (Adrenergic alpha-1 Receptor Antagonists); NW1291F1W8 (Doxazosin)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: ["*Adrenergic alpha-1 Receptor Antagonists/tu \[Therapeutic Use\]"](#)
[Aged](#)
["Cocaine-Related Disorders/di \[Diagnosis\]"](#)
["*Cocaine-Related Disorders/dt \[Drug Therapy\]"](#)
["Cocaine-Related Disorders/ur \[Urine\]"](#)
[Double-Blind Method](#)
["*Doxazosin/tu \[Therapeutic Use\]"](#)
[Female](#)
[Humans](#)
[Male](#)
[Middle Aged](#)
[Pilot Projects](#)
[Treatment Outcome](#)

Source: MEDLINE

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

36. National-level drug policy and young people's illicit drug use: a multilevel analysis of the European Union.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(149-56), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Vuolo M

Institution: Department of Sociology, Purdue University, 700 W. State Street, West Lafayette, IN 47907-2059, USA. mvuolo@purdue.edu

Language: English

Abstract: INTRODUCTION: Recent research has called upon investigators to exploit cross-national differences to uncover the cultural and structural factors influencing drug use. While the individual-level correlates are well-established, little is known about the association between cross-national variation in drug policies and young people's substance use. This study examines, net of individual-level predictors, the association between national-level drug policy and use of an illicit drug other than cannabis. METHODS: The study uses Eurobarometer repeated cross-sectional surveys in 2002 and 2004 of adolescents aged 15-24 drawn in multistage, random probability samples proportional to population size and density within regions of their country (N=15,191). Participants completed self-reported measures of last month drug use, attitudes toward drugs, school and work participation, and demographics. Gathered from several international bodies, national-level policy measures include drug offense levels, possession decriminalization, and presence and usage of harm reduction strategies. RESULTS: Hierarchical logistic regression models demonstrate that, while controlling for important individual-level predictors, in countries where there is no

restriction on possession of drugs for personal use, the odds of drug use in the last month are 79% lower ($p < 0.05$). On the other hand, higher usage of treatment and drug substitution are associated with higher levels of drug use. These results are robust to several alternate specifications. CONCLUSIONS: Among the strongest and most consistent findings, eliminating punishments for possession for personal use is not associated with higher drug use. The results indicate that researchers should take national-level context into account in individual-level studies of drug use. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland
CAS Registry Number: 0 (Street Drugs)
Publication Type: Journal Article; Randomized Controlled Trial; Research Support, Non-U.S. Gov't
Subject Headings: Adolescent
 Cross-Sectional Studies
 *European Union
 Female
 "*Health Policy/lj [Legislation and Jurisprudence]"
 Humans
 Male
 "*Street Drugs/lj [Legislation and Jurisprudence]"
 "Substance-Related Disorders/di [Diagnosis]"
 "*Substance-Related Disorders/ep [Epidemiology]"
 "*Substance-Related Disorders/th [Therapy]"
 Young Adult
Source: MEDLINE
Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

37. The prevalence of substance use disorders and psychiatric disorders as a function of psychotic symptoms.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(78-84), 0376-8716;1879-0046 (2013 Jul 1)
Author(s): Lechner WV; Dahne J; Chen KW; Pickover A; Richards JM; Daughters SB; Lejuez CW
Institution: Department of Psychology, Oklahoma State University, Stillwater, OK 74075, United States. William.lechner@okstate.edu
Language: English
Abstract: BACKGROUND: Psychotic symptoms represent one of the most severe and functionally impairing components of several psychological disorders. One group with particularly high rates of psychotic symptoms is chronic substance users. However, the literature on psychotic symptoms and substance use is quite narrow and has focused almost exclusively on drug-induced psychosis, neglecting the population of substance users with psychotic symptoms occurring independently of acute drug effects. METHOD: The current study examined demographics, substance dependence, and psychiatric comorbidities among substance users with current (CurrSx), past (PastSx), and no psychotic symptoms (NoSx). Patients ($n=685$) were sequential admissions to a residential substance use treatment center from 2006 to 2009. RESULTS: Compared to NoSx, those who endorsed CurrSx were significantly more likely to meet criteria for lifetime alcohol dependence and lifetime amphetamine dependence. CurrSx were more likely than PastSx to meet for lifetime cannabis dependence. Additionally, CurrSx were more likely to meet criteria for a comorbid psychiatric disorder compared to NoSx, and evidenced a greater number of current psychiatric disorders. NoSx were less likely than both CurrSx and PastSx to meet criteria for Borderline Personality Disorder. CONCLUSION: Individuals with non-substance induced psychotic symptoms appear to meet criteria for specific substance use disorders and psychiatric disorders at higher rates than those without psychotic symptoms; these effects were most evident for those with current as opposed to past symptoms. Findings suggest that these individuals may need specialized care to address potential psychiatric comorbidities and overall greater severity levels relative to

substance users without psychotic symptoms. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: Adult
Comorbidity
Diagnosis Dual (Psychiatry)
Female
Humans
Male
"*Mental Disorders/di [Diagnosis]"
"*Mental Disorders/ep [Epidemiology]"
"Mental Disorders/px [Psychology]"
Middle Aged
Prevalence
"Psychotic Disorders/di [Diagnosis]"
"Psychotic Disorders/ep [Epidemiology]"
"Psychotic Disorders/px [Psychology]"
Questionnaires
"Substance Abuse Treatment Centers/mt [Methods]"
*Substance Abuse Treatment Centers
"*Substance-Related Disorders/di [Diagnosis]"
"*Substance-Related Disorders/ep [Epidemiology]"
"Substance-Related Disorders/px [Psychology]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

38. Social rank and inhalant drug use: the case of lanca perfume use in Sao Paulo, Brazil.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(92-9), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Sanchez ZM; Noto AR; Anthony JC

Institution: Department of Preventive Medicine, Universidade Federal de Sao Paulo, Rua Borges Lagoa 1341, Sao Paulo, Brazil. zila.sanchez@gmail.com

Language: English

Abstract: BACKGROUND: Lanca perfume (chloroform/ether) is an inhalant used mainly by higher social class students in Brazil. In light of the social and epidemiological features of lanca use, supply, and distribution, this investigation tests hypotheses about the degree to which use of inhalant lanca might be occurring in clusters, consistent with social sharing and diffusion, and might show a direct association with social rank even within the relatively privileged social context of private schools in a large mega-city of Latin America. METHODS: Epidemiologic self-report survey data were from a large representative sample of urban post-primary private school students in Sao Paulo city, Brazil, in 2008. Newly incident lanca use was studied, first with estimates of clustering from the alternating logistic regressions (ALR) and then with conditional logistic regressions to probe into the hypothesized direct social rank association. RESULTS: ALR disclosed a clustering of newly incident lanca users within private school classrooms (pairwise odds ratio (PWOR)=2.1; 95% CI=1.3, 3.3; p=0.002) as well as clusters of recently active lanca use (PWOR=1.9; 95% CI=1.1, 3.3; p=0.02). Occurrence of lanca use within private school classrooms was directly associated with social rank (odds ratio (OR)=0.2; 95% CI=0.1, 0.8; p=0.03 in the contrast of lowest socio-economic status (SES) versus highest SES strata within classrooms). Thereafter, study of other drugs disclosed similar patterns. CONCLUSIONS: The clustering estimates are consistent with concepts of person-to-person sharing of lanca within private school classrooms as well as other dynamic processes that might promote lanca clusters in this context. An observed direct association with social rank is not specific to lanca use. Direct SES estimates across a broad profile of drug compounds suggests causal processes over and above the more

specific initially hypothesized social rank gradients in the lanca diffusion process. A novel facet of the evidence is greater occurrence of drug use among the higher social rank private school students, which should be of interest in the social science community. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Perfume)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
"Brazil/eh [Ethnology]"
Child
Cross-Sectional Studies
Female
Humans
"Inhalant Abuse/di [Diagnosis]"
"*Inhalant Abuse/ec [Economics]"
"*Inhalant Abuse/eh [Ethnology]"
Male
"Perfume/ad [Administration and Dosage]"
"Perfume/ec [Economics]"
Self Report
*Social Class
*Social Environment
*Urban Population
Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

39. Chronic childhood adversity and stages of substance use involvement in adolescents.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(85-91), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Benjet C; Borges G; Medina-Mora ME; Mendez E

Institution: Department of Epidemiological and Psychosocial Research, National Institute of Psychiatry Ramon de la Fuente, Calzada Mexico Xochimilco 101, Colonia San Lorenzo Huipulco, Mexico City, Mexico. cbenjet@imp.edu.mx

Language: English

Abstract: BACKGROUND: Studies have shown that those who experience chronic childhood adversity have a greater likelihood of substance abuse and dependence. However, substance use disorders are first preceded by substance use, and substance use is preceded by substance use opportunities. This study aims to estimate the association of chronic adversity with different stages of substance involvement: opportunities, use given the opportunity and abuse or dependence given use. METHODS: 3005 adolescents aged 12-17 were interviewed in a stratified multistage general population probability survey of Mexico City, Mexico. Substance involvement and chronic childhood adversities were assessed with the World Mental Health Composite International Diagnostic Interview Adolescent Version (WMH-CIDI-A). Discrete-time survival models were performed; their survival coefficients and standard errors were exponentiated, and reported as odds-ratios (ORs). RESULTS: Childhood adversities were associated with alcohol opportunity, alcohol use and alcohol abuse/dependence with significant ORs for individual adversities ranging from 1.4 to 4.1. Childhood adversities were also associated with illicit drug opportunity, drug use and drug abuse/dependence with significant ORs for individual adversities ranging from 1.6 to 17.3. Having more adversities was associated with greater incremental odds of substance involvement, particularly drug use given the opportunity. CONCLUSIONS: While adversities are mostly related to transitioning into use and disorder, a few are related to substance opportunities, particularly those which were likely to make substances available through parents.

Attending to the needs of youth living in adversity, particularly adversities related to parental dysfunction and child abuse should be integral to addiction prevention efforts. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Randomized Controlled Trial

Subject Headings: Adolescent
 "*Adolescent Behavior/px [Psychology]"
 Child
 "Child Abuse/eh [Ethnology]"
 "*Child Abuse/px [Psychology]"
 Cross-Sectional Studies
 Female
 Humans
 *Life Change Events
 Male
 "Mexico/eh [Ethnology]"
 "Parent-Child Relations/eh [Ethnology]"
 *Parent-Child Relations
 Retrospective Studies
 Risk Factors
 Socioeconomic Factors
 "Substance-Related Disorders/eh [Ethnology]"
 "*Substance-Related Disorders/px [Psychology]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

40. Predictors of stimulant abuse treatment outcomes in severely mentally ill outpatients.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(162-5), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Angelo FN; McDonell MG; Lewin MR; Srebnik D; Lowe J; Roll J; Ries R

Institution: Department of Psychiatry and Behavioral Sciences, University of Washington School of Medicine, Seattle, WA 98104, United States.

Language: English

Abstract: BACKGROUND: Severe mental illness is often exclusionary criteria for studies examining factors that influence addiction treatment outcome. Therefore, little is known about predictors of treatment response of individuals receiving psychosocial treatments for addictions who suffer from co-occurring severe mental illness. METHODS: The impact of demographic, substance abuse severity, psychiatric severity, and service utilization variables on in-treatment performance (i.e., longest duration of abstinence) in a 12-week contingency management (CM) intervention for stimulant abuse in 96 severely mentally ill adults was investigated. A 4-step linear regression was used to identify independent predictors of in-treatment abstinence. RESULTS: This model accounted for 37.4% of variance in the longest duration of abstinence outcome. Lower levels of stimulant use (i.e., stimulant-negative urine test) and psychiatric severity (i.e., lower levels of psychiatric distress), as well as higher rates of outpatient treatment utilization at study entry were independently associated with longer duration of drug abstinence. CONCLUSION: These data suggest that individuals with low levels of stimulant use and psychiatric severity, as well as those actively engaged in services are most likely to succeed in a typical CM intervention. For others, modifications to CM interventions, such as increasing the value of reinforcement or adding CM to evidence based psychiatric interventions may improve treatment outcomes. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Central Nervous System Stimulants)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: Adult
 "*Amphetamine-Related Disorders/di [Diagnosis]"
 "Amphetamine-Related Disorders/px [Psychology]"
 "*Amphetamine-Related Disorders/th [Therapy]"
 "Central Nervous System Stimulants/ae [Adverse Effects]"
 "*Cocaine-Related Disorders/di [Diagnosis]"
 "Cocaine-Related Disorders/px [Psychology]"
 "*Cocaine-Related Disorders/th [Therapy]"
 Female
 Humans
 Male
 "Mentally Ill Persons/px [Psychology]"
 *Mentally Ill Persons
 Middle Aged
 Predictive Value of Tests
 *Severity of Illness Index
 Treatment Outcome

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

41. Help seeking for drug and alcohol problems among adults age 50 and older: a comparison of the NLAES and NESARC surveys.

Citation: Drug & Alcohol Dependence, July 2013, vol./is. 131/1-2(157-61), 0376-8716;1879-0046 (2013 Jul 1)

Author(s): Sacco P; Kuerbis A; Goge N; Bucholz KK

Institution: School of Social Work, University of Maryland-Baltimore, 525 West Redwood Street, Baltimore, MD 21201, United States. psacco@ssw.umaryland.edu

Language: English

Abstract: BACKGROUND: Due to population aging and generational changes in alcohol and drug use, substance use disorders and treatment need are projected to increase among adults over 50. We analyzed data from two national surveys conducted 10 years apart [(NLAES (1991-1992) and NESARC (2001-2002))] to explore changes in help-seeking for alcohol and drug problems among adults over age 50. METHODS: Data were pooled on help seeking for substance related problems, sociodemographic and clinical variables, and services type (i.e., formal and informal). Differences between the surveys were assessed, and help seeking among those under age 50 was compared to younger individuals; changes in the sociodemographic and clinical correlates of help seeking among those over age 50 were examined. RESULTS: Among those 50 and older, rates of lifetime help seeking for any substance problem were higher in NESARC than NLAES, and percentages of those considering but not getting help were also higher in NESARC. Among those 50+, rates of past-year help seeking for drug use were higher in NESARC, but among those with lifetime substance use disorders, help seeking rates for alcohol and any substance were lower in the NESARC. Older help seekers in the NESARC were less likely to be White, more likely to be low income, and more likely to be current or former drug users than NLAES help seekers. CONCLUSIONS: This study documents increased rates of help seeking for substance related problems among those 50 and older and identifies cohort differences in profile of past-year help seekers. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Comparative Study; Journal Article; Research Support, N.I.H., Extramural

Subject Headings: Age Factors
 Aged
 "Alcoholism/di [Diagnosis]"

"Alcoholism/ep [Epidemiology]"
 "Alcoholism/th [Therapy]"
 Cohort Studies
 Female
 "*Health Surveys/mt [Methods]"
 "Health Surveys/td [Trends]"
 Humans
 Longitudinal Studies
 Male
 Middle Aged
 *Patient Acceptance of Health Care
 "Substance-Related Disorders/di [Diagnosis]"
 "*Substance-Related Disorders/ep [Epidemiology]"
 "*Substance-Related Disorders/th [Therapy]"
 "United States/ep [Epidemiology]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

42. Manganese-induced parkinsonism in methcathinone abusers: bio-markers of exposure and follow-up.

Citation: European Journal of Neurology, June 2013, vol./is. 20/6(915-20), 1351-5101;1468-1331 (2013 Jun)

Author(s): Sikk K; Haldre S; Aquilonius SM; Asser A; Paris M; Roose A; Petterson J; Eriksson SL; Bergquist J; Taba P

Institution: Department of Neurology and Neurosurgery, University of Tartu, Tartu, Estonia.
 katrin.sikk@regionaalhaigla.ee

Language: English

Abstract: BACKGROUND AND PURPOSE: Methcathinone abuse is a new cause of manganism. The psychostimulant is prepared from pseudoephedrine using potassium permanganate as an oxidant. We describe the clinical, biological, neuroimaging characteristics and follow-up results in a large Estonian cohort of intravenous methcathinone users. METHODS: During 2006-2012 we studied 38 methcathinone abusers with a mean age of 33 years. Subjects were rated by the Unified Parkinson's Disease Rating Scale (UPDRS), Hoehn and Yahr (HY), and Schwab and England (SE) rating scales. Twenty-four cases were reassessed 9-70 (20 + 15) months after the initial evaluation. Manganese (Mn) in plasma and hair was analysed by inductively coupled plasma-atom emission spectrometry. Magnetic resonance imaging (MRI) was performed in 11, and single-photon emission computed tomography (SPECT) with iodobenzamide (IBZM) in eight subjects. RESULTS: The average total UPDRS score was 43 + 21. The most severely affected domains in UPDRS Part III were speech and postural stability, the least affected domain was resting tremor. At follow-up there was worsening of HY and SE rating scales. Subjects had a higher mean level of Mn in hair (2.9 + 3.8 ppm) than controls (0.82 + 1.02 ppm), P = 0.02. Plasma Mn concentrations were higher (11.5 + 6.2 ppb) in active than in former users (5.6 + 1.8 ppb), P = 0.006. Active methcathinone users had increased MRI T1-signal intensity in the globus pallidus, substantia nigra and periaqueductal gray matter. IBZM-SPECT showed normal symmetric tracer uptake in striatum. CONCLUSION: Methcathinone abusers develop a distinctive hypokinetic syndrome. Though the biomarkers of Mn exposure are characteristic only of recent abuse, the syndrome is not reversible. 2013 The Author(s) European Journal of Neurology 2013 EFNS.

Country of Publication: England

CAS Registry Number: 0 (Biological Markers); 0 (Propiophenones); 42Z2K6ZL8P (Manganese); 5650-44-2 (monomethylpropion)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adolescent](#)
[Adult](#)

"Biological Markers/bl [Blood]"
 "Biological Markers/ch [Chemistry]"
 Cohort Studies
 "Estonia/ep [Epidemiology]"
 Female
 Follow-Up Studies
 "Hair/ch [Chemistry]"
 Humans
 Male
 "*Manganese/bl [Blood]"
 Middle Aged
 "*Parkinson Disease Secondary/bl [Blood]"
 "*Parkinson Disease Secondary/ci [Chemically Induced]"
 "Parkinson Disease Secondary/ep [Epidemiology]"
 "Propiophenones/ae [Adverse Effects]"
 *Propiophenones
 "*Substance-Related Disorders/bl [Blood]"
 "Substance-Related Disorders/ep [Epidemiology]"
 Young Adult

Source: MEDLINE

Full Text: Available from *Wiley* in *European Journal of Neurology*; Note: ; Collection notes: Offsite access: Type "Homerton" into box entitled "Institution Name" at lower right of the screen and select "Homerton Hospital"

43. Update on tamper-resistant drug formulations.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(13-23), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Romach MK; Schoedel KA; Sellers EM

Institution: DL Global Partners Inc., Toronto, ON, Canada. m.romach@dlglobalpartners.com

Language: English

Abstract: An expert panel convened in 2005 by the College on Problems of Drug Dependence (CPDD) to consider strategies to reduce the risk of prescription medication abuse concluded that drug formulation plays a significant role in determining risk of abuse. Efforts on the part of the pharmaceutical industry to develop drugs that deter abuse have focused primarily on opioid formulations resistant to common forms of tampering, most notably crushing or dissolving the tablet to accelerate release. Several opioid formulations developed to be tamper resistant have been approved, but the US Food and Drug Administration has not approved explicit label claims of abuse deterrence and has stated that any such claim will require substantial postmarketing data. Drug development efforts in this area raise questions about the relative impact of abuse-deterrent formulations, not only on individuals who might abuse a medication, but also on patients who are compliant with therapy. This review discusses progress since the 2005 CPDD meeting with an emphasis on opioids. Articles cited in the review were identified via a PubMed search covering the period between January 1, 2000, and October 5, 2011. Scientific work presented by the authors and their colleagues at meetings held through May 2012 also was included. Published literature suggests that development of abuse-deterrent products will require broad public health support and continued encouragement from regulatory authorities so that such products will become the expected standard of care for certain drug classes. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Analgesics, Opioid); 0 (Prescription Drugs); 0 (Prodrugs)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't; Review

Subject Headings: "Analgesics Opioid/cs [Chemical Synthesis]"
 "Analgesics Opioid/st [Standards]"
 *Analgesics Opioid

"Chemistry Pharmaceutical/st [Standards]"
 "*Chemistry Pharmaceutical/td [Trends]"
 "Drug Compounding/st [Standards]"
 "*Drug Compounding/td [Trends]"
 Humans
 "*Opioid-Related Disorders/pc [Prevention and Control]"
 "Prescription Drugs/cs [Chemical Synthesis]"
 "Prescription Drugs/st [Standards]"
 "Prodrugs/cs [Chemical Synthesis]"
 "Prodrugs/st [Standards]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

44. Adult hippocampal neurogenesis in the pathogenesis of addiction and dual diagnosis disorders.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(1-12), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Chambers RA

Institution: Laboratory for Translational Neuroscience of Dual Diagnosis & Development, Department of Psychiatry, Indiana University School of Medicine, 791 Union Drive, Indianapolis, IN 46202, United States. robchamb@iupui.edu

Language: English

Abstract: BACKGROUND: As knowledge deepens about how new neurons are born, differentiate, and wire into the adult mammalian brain, growing evidence depicts hippocampal neurogenesis as a special form of neuroplasticity that may be impaired across psychiatric disorders. This review provides an integrated-evidence based framework describing a neurogenic basis for addictions and addiction vulnerability in mental illness. METHODS: Basic studies conducted over the last decade examining the effects of addictive drugs on adult neurogenesis and the impact of neurogenic activity on addictive behavior were compiled and integrated with relevant neurocomputational and human studies. RESULTS: While suppression of hippocampal neurogenic proliferation appears to be a universal property of addictive drugs, the pathophysiology of addictions involves neuroadaptive processes within frontal-cortical-striatal motivation circuits that the neurogenic hippocampus regulates via direct projections. States of suppressed neurogenic activity may simultaneously underlie psychiatric and cognitive symptoms, but also confer or signify hippocampal dysfunction that heightens addiction vulnerability in mental illness as a basis for dual diagnosis disorders. CONCLUSIONS: Research on pharmacological, behavioral and experiential strategies that enhance adaptive regulation of hippocampal neurogenesis holds potential in advancing preventative and integrative treatment strategies for addictions and dual diagnosis disorders. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Review

Subject Headings: Adult
 Age Factors
 Animals
 "*Behavior Addictive/di [Diagnosis]"
 "Behavior Addictive/ep [Epidemiology]"
 Diagnosis Dual (Psychiatry)
 "*Hippocampus/pa [Pathology]"
 Humans
 "*Mental Disorders/di [Diagnosis]"
 "Mental Disorders/ep [Epidemiology]"
 "Neurogenesis/ph [Physiology]"
 *Neurogenesis
 "Neuronal Plasticity/ph [Physiology]"

"*Substance-Related Disorders/di [Diagnosis]"
 "Substance-Related Disorders/ep [Epidemiology]"

Source: MEDLINE
Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

45. Drinking drivers and drug use on weekend nights in the United States.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(215-21), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Voas RB; Lacey JH; Jones K; Scherer M; Compton R

Institution: Impaired Driving Center, Pacific Institute for Research and Evaluation, 11720 Beltsville Drive, Suite 900, Calverton, MD 20705-3111, United States. voas@pire.org

Language: English

Abstract: BACKGROUND: Studies of drinking drivers in alcohol-related crashes have shown that high breath-alcohol concentrations (BrACs) are associated with illegal drug use. Until the 2007 National Roadside Survey (NRS), the prevalence of drugs among drinking drivers on U.S. roads was unknown. Using NRS data, we explore how many drivers with positive BrACs may also be using drugs and their significance to current drinking-driving enforcement procedures. METHODS: Based on a stratified, random sample covering the 48 U.S. contiguous states, we conducted surveys on weekend nights from July-November 2007. Of the 8384 eligible motorists contacted, 85.4% provided a breath sample; 70.0%, an oral fluid sample; and 39.1%, a blood sample. We conducted regression analyses on 5912 participants with a breath test and an oral fluid or blood test. The dependent variables of interest were illegal drugs (cocaine, cannabinoids, street drugs, street amphetamines, and opiates) and medicinal drugs (prescription and over-the-counter). RESULTS: 10.5% of nondrinking drivers were using illegal drugs, and 26 to 33% of drivers with illegal BrACs (> 0.08 g/dL) were using illegal drugs. Medicinal drug use was more common among nondrinking drivers (4.0%) than among drivers with illegal BrACs (2.4%). CONCLUSIONS: The significant relationship between an illegal BrAC and the prevalence of an illegal drug suggests as many as 350,000 illegal drug-using drivers are arrested each year for DWI by U.S. alcohol-impaired driving enforcement. These drug-using drivers need to be identified and appropriate sanctions/treatment programs implemented for them in efforts to extend per se laws to unapprehended drug users. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Street Drugs)

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: Adult
 "*Alcohol Drinking/ep [Epidemiology]"
 "Alcohol Drinking/me [Metabolism]"
 *Automobile Driving
 "Breath Tests/mt [Methods]"
 "Data Collection/mt [Methods]"
 Female
 Humans
 Male
 Middle Aged
 "Saliva/ch [Chemistry]"
 "Street Drugs/an [Analysis]"
 "Street Drugs/bl [Blood]"
 *Street Drugs
 "*Substance Abuse Detection/mt [Methods]"
 "*Substance-Related Disorders/di [Diagnosis]"
 "*Substance-Related Disorders/ep [Epidemiology]"
 "Substance-Related Disorders/me [Metabolism]"

[Time Factors](#)
[Young Adult](#)

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

46. A survey of hallucinogenic mushroom use, factors related to usage, and perceptions of use among college students.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(245-8), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Hallock RM; Dean A; Knecht ZA; Spencer J; Taverna EC

Institution: Neuroscience Program, United States. rhallock@skidmore.edu

Language: English

Abstract: BACKGROUND: Recreational usage and attitudes toward psilocybin-containing hallucinogenic mushrooms among college students are seldom explored. METHODS: We surveyed 882 randomly selected undergraduates at Skidmore College in upstate New York and quantified whether participants had ever used psilocybin mushrooms, their attitudes toward the drug, and polydrug use. RESULTS: There were 409 responses and 29.5% of the sample reported psilocybin use. Among users, the mean number of times they reported using mushrooms was 3.4 (mode=1). The top factors cited that influenced their decisions to try hallucinogenic mushrooms for the first time were 'curiosity', 'to achieve a mystical experience', and 'introspection'. Users and non-users had significantly different perceptions of mushrooms: non-users were more likely to say that hallucinogenic mushrooms were addictive and had the potential for abuse than users. Users did not believe that psilocybin negatively impacts their academics, mental health, or physical health, while non-users did. Both users and non-users of psilocybin reported high life-time use of alcohol (97% vs 96%, respectively), marijuana (98% vs 73%, respectively) and tobacco (82% vs 54%, respectively). Psilocybin users were significantly more likely to use other drugs such as cocaine, ecstasy, opiates, non-prescribed prescription drugs, opiates, and lysergic acid diethylamide (LSD) than non-users of psilocybin. CONCLUSION: This study uncovers important insights into hallucinogenic mushroom use by college students. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Hallucinogens); 0 (Street Drugs); 2RV7212BP0 (Psilocybine)

Publication Type: Journal Article; Randomized Controlled Trial

Subject Headings: [Adolescent](#)
[Adult](#)
[*Agaricales](#)
[Female](#)
["Hallucinogens/ad \[Administration and Dosage\]"](#)
[*Hallucinogens](#)
[Humans](#)
[Male](#)
[*Perception](#)
["Psilocybine/ad \[Administration and Dosage\]"](#)
[Street Drugs](#)
["*Students/px \[Psychology\]"](#)
["Substance-Related Disorders/di \[Diagnosis\]"](#)
["*Substance-Related Disorders/ep \[Epidemiology\]"](#)
["Substance-Related Disorders/px \[Psychology\]"](#)
["Universities/td \[Trends\]"](#)
[*Universities](#)
[Young Adult](#)

Source: MEDLINE

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

47. The Emergency Department as a prevention site: a demographic analysis of substance use among ED patients.

- Citation:** Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(230-3), 0376-8716;1879-0046 (2013 Jun 1)
- Author(s):** Hankin A; Daugherty M; Bethea A; Haley L
- Institution:** Emory University, Emergency Medicine, Decatur, GA 30032, United States. ahankin@emory.edu
- Language:** English
- Abstract:** OBJECTIVES: To identify rates of alcohol and drug use among patients presenting to an inner-city Emergency Department (ED) and to describe demographic and health characteristics of patients with high-risk use.METHODS: A cross-sectional study of patients presenting to the ED for any complaint. Patients were administered a brief screening about past 12-months alcohol and drug use. Patients who answered "yes" to any question were approached for a longer survey, the Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST). Based on ASSIST scores patients received a brief intervention, and, when appropriate, a referral for brief outpatient therapy or specialized substance abuse treatment. Patients whose score indicated high-risk or dependent use were also asked demographic and health questions.RESULTS: Over a 20-month period, 19,055 patients were pre-screened. 87.1% of patients were black, 57% were male, with average age 44.8 years. 27.6% of patients pre-screened positive for drug or alcohol use; among these patients 44.2% scored in the low-risk range on the ASSIST, 35.8% moderate risk, 10% high risk and 10% probable dependence. Among patients with high-risk or dependent use, 70% rated their current health as fair/poor, with a mean of 1.7 ED visits in the prior 30 days. 40.7% reported "extreme" stress due to their use. 34.6% reported that they had stable housing and 13.6% were fully employed.CONCLUSION: Among all patients seen in the ED for any complaint, a significant proportion is engaged in alcohol and drug use that increases their risk of health and social consequences. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.
- Country of Publication:** Ireland
- Publication Type:** Journal Article; Research Support, U.S. Gov't, P.H.S.
- Subject Headings:** Adult
 "Alcohol Drinking/ep [Epidemiology]"
 "*Alcohol Drinking/pc [Prevention and Control]"
 Cross-Sectional Studies
 "*Data Collection/mt [Methods]"
 "*Demography/mt [Methods]"
 *Emergency Service Hospital
 Female
 Humans
 Male
 "Mass Screening/mt [Methods]"
 Middle Aged
 Self Report
 "*Substance-Related Disorders/di [Diagnosis]"
 "Substance-Related Disorders/ep [Epidemiology]"
 "*Substance-Related Disorders/pc [Prevention and Control]"
- Source:** MEDLINE
- Full Text:** Available from *Elsevier* in *Drug and Alcohol Dependence*

48. A daily calendar analysis of substance use and dating violence among high risk urban youth.

- Citation:** Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(194-200), 0376-8716;1879-0046 (2013 Jun 1)
- Author(s):** Epstein-Ngo QM; Cunningham RM; Whiteside LK; Chermack ST; Booth BM; Zimmerman MA; Walton MA

Institution: University of Michigan Substance Abuse Research Center, University of Michigan, Ann Arbor, MI 48109, USA. qen@med.umich.edu

Language: English

Abstract: BACKGROUND: Dating violence (DV) among youth is an important public health problem. This study examined reasons for physical DV and the association between substance use and youth DV using daily calendar-based analyses among at-risk urban youth. METHODS: Patients (aged 14-24) presenting to an urban Emergency Department (ED) for a violent injury and a proportionally selected comparison sample of non-violently injured youth who screened positive for substance use in the past 6 months (n=599) were enrolled in this study. Multi-level, multinomial regressions were conducted using daily-level substance use data from Time Line Follow Back (TLFB) responses and physical DV data that were obtained by coding Time Line Follow Back - Aggression Module responses for the 30 days prior to visiting the ED. RESULTS: The two most commonly reported reasons for physical dating aggression and victimization, across sexes, were "jealousy/rumors" or "angry/bad mood." Multi-level multinomial regression models, adjusting for clustering within individual participants, showed that among females, cocaine use and sedative/opiate use were associated with severe dating victimization and alcohol use was associated with severe dating aggression. CONCLUSIONS: Use of TLFB data offers a unique opportunity to understand daily-level factors associated with specific incidents of DV in more detail. This study provides novel data regarding reasons for DV and the relationship between daily substance use and DV among urban youth, with alcohol, cocaine, and sedative/opiate use being associated with various types of DV. ED based DV interventions should be tailored to address youths' reasons for DV as well as reducing their substance use. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adolescent](#)
["*Courtship/px \[Psychology\]"](#)
[Female](#)
[Humans](#)
[Interpersonal Relations](#)
[Longitudinal Studies](#)
[Male](#)
[*Medical Records](#)
[Risk Factors](#)
["*Substance-Related Disorders/di \[Diagnosis\]"](#)
["Substance-Related Disorders/ep \[Epidemiology\]"](#)
["*Substance-Related Disorders/px \[Psychology\]"](#)
["Urban Population/td \[Trends\]"](#)
[*Urban Population](#)
["*Violence/px \[Psychology\]"](#)
["Violence/td \[Trends\]"](#)
[Young Adult](#)

Source: MEDLINE

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

49. Choice to view cocaine images predicts concurrent and prospective drug use in cocaine addiction.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(178-85), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Moeller SJ; Beebe-Wang N; Woicik PA; Konova AB; Maloney T; Goldstein RZ

Institution: Brookhaven National Laboratory, Upton, NY 11973, United States.

Language: English

Abstract: BACKGROUND: Identifying variables that predict drug use in treatment-seeking drug addicted individuals is a crucial research and therapeutic goal. This study tested the hypothesis that choice to view cocaine images is associated with concurrent and prospective drug use in cocaine addiction. METHODS: To establish choice-concurrent drug use associations, 71 cocaine addicted subjects (43 current users and 28 treatment seekers) provided data on (A) choice to view cocaine images and affectively pleasant, unpleasant, and neutral images [collected under explicit contingencies (when choice was made between two fully visible side-by-side images) and under more probabilistic contingencies (when choice was made between pictures hidden under flipped-over cards)]; and (B) past-month cocaine and other drug use. To establish choice-prospective drug use associations, 20 of these treatment-seeking subjects were followed over the next 6 months. RESULTS: Baseline cocaine-related picture choice as measured by both tasks positively correlated with subjects' concurrent cocaine and other drug use as driven by the actively-using subjects. In a subsequent multiple regression analysis, choice to view cocaine images as compared with affectively pleasant images (under probabilistic contingencies) was the only predictor that continued to be significantly associated with drug use. Importantly, this same baseline cocaine>pleasant probabilistic choice also predicted the number of days drugs were used (cocaine, alcohol, and marijuana) over the next 6 months. CONCLUSIONS: Simulated cocaine choice - especially when probabilistic and when compared with other positive reinforcers - may provide a valid laboratory marker of current and future drug use in cocaine addiction. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland
Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
[*Choice Behavior](#)
["*Cocaine-Related Disorders/di \[Diagnosis\]"](#)
["*Cocaine-Related Disorders/px \[Psychology\]"](#)
[Female](#)
[Follow-Up Studies](#)
[Humans](#)
[Male](#)
[Middle Aged](#)
["*Photic Stimulation/mt \[Methods\]"](#)
[Predictive Value of Tests](#)
[Prospective Studies](#)

Source: MEDLINE

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

50. Does Alcoholics Anonymous work differently for men and women? A moderated multiple-mediation analysis in a large clinical sample.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(186-93), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Kelly JF; Hoepfner BB

Institution: Center for Addiction Medicine, Massachusetts General Hospital and Harvard Medical School, Boston, MA 02114, United States. jkelly11@partners.org

Language: English

Abstract: BACKGROUND: Alcoholics Anonymous (AA) began as a male organization, but about one third is now female. Studies have found that women participate at least as much as men and benefit equally from AA, but it is unclear whether women benefit from AA in the same or different ways as men. This study tested whether gender moderated the mechanisms through which AA aids recovery. METHODS: A cohort study of alcohol dependent adults (N=1726; 24% female; Project MATCH) was assessed on AA attendance during treatment; with mediators at 9 months; outcomes (Percent Days Abstinent [PDA] and Drinks per Drinking Day [DDD]) at 15 months. Multiple mediator

models tested whether purported mechanisms (i.e., self-efficacy, depression, social networks, spirituality/religiosity) explained AA's effects differently for men and women controlling for baseline values, mediators, treatment, and other confounders. RESULTS: For PDA, the proportion of AA's effect accounted for by the mediators was similar for men (53%) and women (49%). Both men and women were found to benefit from changes in social factors but these mechanisms were more important among men. For DDD, the mediators accounted for 70% of the effect of AA for men and 41% for women. Again, men benefitted mostly from social changes. Independent of AA's effects, negative affect self-efficacy was shown to have a strong relationship to outcome for women but not men. CONCLUSIONS: The recovery benefits derived from AA differ in nature and magnitude between men and women and may reflect differing needs based on recovery challenges related to gender-based social roles and drinking contexts. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Comparative Study; Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
[*Alcoholics Anonymous](#)
["*Alcoholism/px \[Psychology\]"](#)
["*Alcoholism/th \[Therapy\]"](#)
["*Cognitive Therapy/mt \[Methods\]"](#)
[Cohort Studies](#)
[Female](#)
[Humans](#)
[Male](#)
[Middle Aged](#)
["*Motivational Interviewing/mt \[Methods\]"](#)
[Sex Factors](#)
["*Temperance/px \[Psychology\]"](#)
[Treatment Outcome](#)

Source: MEDLINE

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

51. "I just wanted to tell you that loperamide WILL WORK": a web-based study of extra-medical use of loperamide.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(241-4), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Daniulaityte R; Carlson R; Falck R; Cameron D; Perera S; Chen L; Sheth A

Institution: Center for Interventions, Treatment, and Addictions Research, Department of Community Health, Boonshoft School of Medicine, Wright State University, Dayton, OH 45435, United States. raminta.daniulaityte@wright.edu

Language: English

Abstract: AIMS: Many websites provide a means for individuals to share their experiences and knowledge about different drugs. Such User-Generated Content (UGC) can be a rich data source to study emerging drug use practices and trends. This study examined UGC on extra-medical use of loperamide among illicit opioid users. METHODS: A website that allows for the free discussion of illicit drugs and is accessible for public viewing was selected for analysis. Web-forum posts were retrieved using web crawlers and retained in a local text database. The database was queried to extract posts with a mention of loperamide and relevant brand/slang terms. Over 1290 posts were identified. A random sample of 258 posts was coded using NVivo to identify intent, dosage, and side-effects of loperamide use. RESULTS: There has been an increase in discussions related to loperamide's use by non-medical opioid users, especially in 2010-2011 Loperamide was primarily discussed as a remedy to alleviate a broad range of opioid withdrawal symptoms, and was sometimes referred to as "poor man's" methadone. Typical doses ranged 70-100mg per day, much higher than an indicated daily dose of 16mg. CONCLUSIONS: This study suggests that loperamide is being used

extra-medically to self-treat opioid withdrawal symptoms. There is a growing demand among people who are opioid dependent for drugs to control withdrawal symptoms, and loperamide appears to fit that role. The study also highlights the potential of the Web as a "leading edge" data source in identifying emerging drug use practices. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Analgesics, Opioid); 6X9OC3H4II (Loperamide)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: ["*Advertising as Topic/ec \[Economics\]"](#)
["Advertising as Topic/mt \[Methods\]"](#)
["Advertising as Topic/td \[Trends\]"](#)
["*Analgesics Opioid/ec \[Economics\]"](#)
["Analgesics Opioid/tu \[Therapeutic Use\]"](#)
 Humans
["*Internet/ec \[Economics\]"](#)
["Internet/td \[Trends\]"](#)
["*Loperamide/ec \[Economics\]"](#)
["Loperamide/tu \[Therapeutic Use\]"](#)
["Opioid-Related Disorders/dt \[Drug Therapy\]"](#)
["Opioid-Related Disorders/ec \[Economics\]"](#)
["Opioid-Related Disorders/ep \[Epidemiology\]"](#)
["Self Care/ec \[Economics\]"](#)
["Self Care/mt \[Methods\]"](#)
["Self Care/td \[Trends\]"](#)
["Substance Withdrawal Syndrome/dt \[Drug Therapy\]"](#)
["Substance Withdrawal Syndrome/ec \[Economics\]"](#)
["Substance Withdrawal Syndrome/ep \[Epidemiology\]"](#)
["*Substance-Related Disorders/ec \[Economics\]"](#)
["Substance-Related Disorders/ep \[Epidemiology\]"](#)

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

52. Atomoxetine does not alter cocaine use in cocaine dependent individuals: double blind randomized trial.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(150-7), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Walsh SL; Middleton LS; Wong CJ; Nuzzo PA; Campbell CL; Rush CR; Lofwall MR

Institution: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, 515 Oldham Court, Lexington, KY 40502, United States. sharon.walsh@uky.edu

Language: English

Abstract: BACKGROUND: Cocaine abuse continues to be a significant public health problem associated with morbidity and mortality. To date, no pharmacotherapeutic approach has proven effective for treating cocaine use disorders. Preclinical and clinical evidence suggests that noradrenergic activity may play a role in mediating some effects of cocaine and may be a rational target for treatment. METHODS: This double blind, placebo-controlled randomized, parallel group, 12-week outpatient clinical trial enrolled cocaine dependent individuals seeking treatment to examine the potential efficacy of the selective norepinephrine reuptake inhibitor, atomoxetine (80 mg/day; p.o.; n = 25), compared to placebo (n = 25). Subjects were initially stratified on cocaine use (< 15 days or > 15 days of the last 30), age and race using urn randomization. Attendance, medication adherence and study compliance were reinforced with contingency management, and weekly counseling was offered. An array of measures (vital signs, laboratory chemistries, cognitive and psychomotor tests, cocaine craving and urine samples for drug testing) was collected throughout the study and at follow-up. RESULTS:

Survival analysis revealed no differences in study retention between the two groups, with approximately 56% of subjects completing the 12-week study (Cox analysis $\chi^2(2) = .72$; $p = .40$; Hazard Ratio 1.48 [95% CI 0.62-3.39]). GEE analysis of the proportion of urine samples positive for benzoylecgonine, a cocaine metabolite, revealed no differences between the atomoxetine and placebo groups ($\chi^2(2) = 0.2$, $p = .66$; OR = 0.89 [95% CI 0.41-1.74]). Atomoxetine was generally well tolerated in this population. CONCLUSIONS: These data provide no support for the utility of atomoxetine in the treatment of cocaine dependence. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Propylamines); ASW034S0B8 (atomoxetine)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: [Adolescent](#)
[Adult](#)
["Cocaine-Related Disorders/di \[Diagnosis\]"](#)
["*Cocaine-Related Disorders/dt \[Drug Therapy\]"](#)
["*Cocaine-Related Disorders/px \[Psychology\]"](#)
[Double-Blind Method](#)
[Female](#)
[Follow-Up Studies](#)
[Humans](#)
[Male](#)
[Middle Aged](#)
["*Propylamines/tu \[Therapeutic Use\]"](#)
[Treatment Outcome](#)
[Young Adult](#)

Source: MEDLINE

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

53. A randomized investigation of methadone doses at or over 100 mg/day, combined with contingency management.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(77-84), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Kennedy AP; Phillips KA; Epstein DH; Reamer DA; Schmittner J; Preston KL

Institution: Treatment Section, Clinical Pharmacology & Therapeutics Branch, Intramural Research Branch of the National Institute on Drug Abuse, 251 Bayview Blvd., Suite 200, Baltimore, MD 21224, United States.

Language: English

Abstract: BACKGROUND: Methadone maintenance for heroin dependence reduces illicit drug use, crime, HIV risk, and death. Typical dosages have increased over the past few years, based on strong experimental and clinical evidence that dosages under 60 mg/day are inadequate and that dosages closer to 100mg/day produce better outcomes. However, there is little experimental evidence for the benefits of exceeding 100 mg/day, or for individualizing methadone dosages. We sought to provide such evidence. METHODS: We combined individualized methadone dosages over 100 mg/day with voucher-based cocaine-targeted contingency management (CM) in 58 heroin- and cocaine-dependent outpatients. Participants were randomly assigned to receive a fixed dose increase from 70 mg/day to 100mg/day, or to be eligible for further dose increases (up to 190 mg/day, based on withdrawal symptoms, craving, and continued heroin use). All dosing was double-blind. The main outcome measure was simultaneous abstinence from heroin and cocaine. RESULTS: We stopped the study early due to slow accrual. Cocaine-targeted CM worked as expected to reduce cocaine use. Polydrug use (effect-size $h=.30$) and heroin craving (effect-size $d=.87$) were significantly greater in the flexible/high-dose condition than in the fixed-dose condition, with no trend toward lower heroin use in the flexible/high-dose participants. CONCLUSIONS: Under double-blind conditions, dosages of methadone over 100mg/day, even when prescribed based on specific signs and

symptoms, were not better than 100mg/day. This counterintuitive finding requires replication, but supports the need for additional controlled studies of high-dose methadone. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

CAS Registry Number: UC6VBE7V1Z (Methadone)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Intramural

Subject Headings: Adult
 "Cocaine-Related Disorders/di [Diagnosis]"
 "*Cocaine-Related Disorders/dt [Drug Therapy]"
 "*Cocaine-Related Disorders/ur [Urine]"
 Disease Management
 Dose-Response Relationship Drug
 Double-Blind Method
 Female
 "Heroin Dependence/di [Diagnosis]"
 "*Heroin Dependence/dt [Drug Therapy]"
 "*Heroin Dependence/ur [Urine]"
 Humans
 Male
 "*Methadone/ad [Administration and Dosage]"
 Middle Aged
 Treatment Outcome
 Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

54. Predictors of nicotine dependence symptoms among never-smoking adolescents: a longitudinal analysis from the Nicotine Dependence in Teens Study.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(38-44), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Racicot S; McGrath JJ; Karp I; O'Loughlin J

Institution: Pediatric Public Health Psychology Laboratory, Department of Psychology, Concordia University, 7141 Sherbrooke Street West, Montreal, Quebec, Canada H4B 1R6.

Language: English

Abstract: BACKGROUND: Recent cross-sectional studies suggest some adolescents who have never smoked cigarettes experience nicotine dependence (ND) symptoms and that exposure to second-hand smoke, social exposure to smoking, and alcohol use are plausible correlates. The aim of this study was to replicate and extend these findings by investigating possible predictors of ND symptoms longitudinally. METHOD: Participants included 847 secondary school students who had never smoked cigarettes enrolled in the Nicotine Dependence in Teens Study. Adolescents completed self-report questionnaires measuring smoking status, ND symptoms, and risk factors for ND in smokers (i.e., socio-demographic indicators, social exposure to smoking, psychosocial indicators, and substance use) in 20 survey cycles from 7 to 11th grade. Generalized estimating equations, which account for repeated measures within individuals, were used to test the predictors of ND symptoms. RESULTS: Consistent with previous research, 7.8% of never-smokers across all cycles endorsed at least one ND symptom. Younger age ($p < .001$), country of birth ($p < .05$), peer smoking ($p < .001$), teacher smoking ($p < .05$), depression ($p < .05$), stress ($p < .001$), lower self-esteem ($p < .05$), impulsivity ($p < .05$), and alcohol use ($p < .001$) predicted greater ND symptoms in multivariable modeling. CONCLUSIONS: Replicating previous cross-sectional findings, peer smoking and alcohol use predicted ND symptoms among never-smoking adolescents. Extending these findings, previous predictors only observed among ever-smokers, including socio-demographic and psychosocial indicators, also predicted ND symptoms. This longitudinal investigation demonstrated the temporal relation of the predictors preceding

ND symptoms. Future research should consider longer prospective studies with younger children to capture early onset of ND symptoms and with longer follow-up to detect eventual smoking uptake. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Tobacco Smoke Pollution)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
 "Adolescent Behavior/px [Psychology]"
 *Adolescent Behavior
 Child
 Cohort Studies
 Cross-Sectional Studies
 Female
 Humans
 Longitudinal Studies
 Male
 Predictive Value of Tests
 Risk Factors
 "*Smoking/ep [Epidemiology]"
 "Smoking/px [Psychology]"
 *Tobacco Smoke Pollution
 "*Tobacco Use Disorder/di [Diagnosis]"
 "*Tobacco Use Disorder/ep [Epidemiology]"
 "Tobacco Use Disorder/px [Psychology]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

55. Gender differences in cannabis use disorders: results from the National Epidemiologic Survey of Alcohol and Related Conditions.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(101-8), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Khan SS; Secades-Villa R; Okuda M; Wang S; Perez-Fuentes G; Kerridge BT; Blanco C

Institution: Department of Psychiatry, Columbia University/New York State Psychiatric Institute, 1051 Riverside Drive, Unit 69, New York, NY 10032, USA.

Language: English

Abstract: BACKGROUND: To examine gender differences among individuals diagnosed with DSM-IV lifetime cannabis use disorder (CUD).METHODS: A nationally representative sample of U.S. adults aged 18 years or older that were diagnosed with lifetime CUD (n=3297): Men (n=2080), Women (n=1217). Data were drawn from the 2001-2002 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC, n=43,093). The survey response rate was 81%.RESULTS: Nearly all individuals with CUD had a psychiatric comorbidity (95.6% of men, 94.1% of women). Men with lifetime CUD were more likely than women to be diagnosed with any psychiatric disorder, any substance use disorder and antisocial personality disorder, whereas women with CUD had more mood and anxiety disorders. After adjusting for gender differences in sociodemographic correlates and the prevalence of psychiatric disorders in the general population, women with CUD were at greater risk for externalizing disorders. Men with CUD met more criteria for cannabis abuse, had longer episodes of CUD, smoked more joints, and were older at remission when compared to women with CUD. Women experienced telescoping to CUD. Treatment-seeking rates were very low for both genders, and there were no gender differences in types of services used or reasons for not seeking treatment.CONCLUSIONS: There are important gender differences in the clinical characteristics and psychiatric comorbidities among individuals with CUD. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
 "Alcoholism/di [Diagnosis]"
 "Alcoholism/ep [Epidemiology]"
 Female
 "*Health Surveys/mt [Methods]"
 Humans
 Male
 "Marijuana Abuse/di [Diagnosis]"
 "*Marijuana Abuse/ep [Epidemiology]"
 "*Marijuana Abuse/px [Psychology]"
 "Mental Disorders/di [Diagnosis]"
 "*Mental Disorders/ep [Epidemiology]"
 "*Mental Disorders/px [Psychology]"
 *Sex Characteristics
 "United States/ep [Epidemiology]"
 Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

56. A randomized study of contingency management in cocaine-dependent patients with severe and persistent mental health disorders.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(234-7), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Petry NM; Alessi SM; Rash CJ

Institution: Calhoun Cardiology Center - Behavioral Health, University of Connecticut Health Center, 263 Farmington Avenue, Farmington, CT 06030-3944, USA. npetry@uchc.edu

Language: English

Abstract: BACKGROUND: Contingency management (CM) is efficacious for reducing drug use, but it has rarely been applied to patients with severe and persistent mental health problems. This study evaluated the efficacy of CM for reducing cocaine use in psychiatric patients treated at a community mental health center. METHODS: Nineteen cocaine-dependent patients with extensive histories of mental health problems and hospitalizations were randomized to twice weekly urine sample testing with or without CM for 8 weeks. In the CM condition, patients earned the chance to win prizes for each cocaine-negative urine sample. Patients also completed an instrument assessing severity of psychiatric symptoms pre- and post-treatment. RESULTS: Patients assigned to CM achieved a mean (standard deviation) of 2.9 (1.7) weeks of continuous cocaine abstinence versus 0.6 (1.7) weeks for patients in the testing only condition, $p=.008$, Cohen's effect size $d=1.35$. Of the 16 expected samples, 46.2% (27.5) were cocaine negative in the CM condition versus 13.8% (27.9) in the testing only condition, $p=.02$, $d=1.17$, but proportions of negative samples submitted did not differ between groups. Reductions in psychiatric symptoms were noted over time in CM, but not the testing only, condition, $p=.02$. CONCLUSIONS: CM yielded benefits for enhancing durations of abstinence in dual diagnosis patients, and it also was associated with reduced psychiatric symptoms. These findings call for larger-scale and longer-term evaluations of CM in psychiatric populations. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: Adult
 "Cocaine-Related Disorders/di [Diagnosis]"
 "*Cocaine-Related Disorders/ep [Epidemiology]"
 "*Cocaine-Related Disorders/th [Therapy]"
 Disease Management
 Female

Humans
 Male
 "Mental Disorders/di [Diagnosis]"
 "*Mental Disorders/ep [Epidemiology]"
 "*Mental Disorders/th [Therapy]"
 Middle Aged
 *Severity of Illness Index
 Time Factors
 Treatment Outcome

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

57. Religiosity and substance use among Asian American college students: moderated effects of race and acculturation.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(142-9), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Luk JW; Emery RL; Karyadi KA; Patock-Peckham JA; King KM

Institution: Department of Psychology, University of Washington, Box 351525, Seattle, WA 98195, United States. jwluk@uw.edu

Language: English

Abstract: BACKGROUND: Religiosity is a well-established protective factor against substance use among Caucasians, but limited research has examined its role among Asian Americans. The purposes of this study were (1) to examine whether the associations between religiosity and substance use outcomes differed across Caucasians and Asian Americans, and (2) to test whether acculturation moderated the associations between religiosity and substance use outcomes among Asian Americans. METHOD: We utilized a large and diverse cross-sectional sample of 839 college students to test whether race moderated the associations between religiosity and substance use outcomes (Study 1). We then replicated and extended our findings in a separate college sample of 340 Asian Americans, and examined the moderating role of acculturation on the associations between religiosity and substance use outcomes (Study 2). RESULTS: Controlling for age, gender, and paternal education, religiosity was protective against alcohol use, alcohol problems, and marijuana use among Caucasians but was unrelated to these outcomes among Asian Americans in Study 1. In Study 2, religiosity was protective against alcohol problems only at high levels of acculturation. Moreover, religiosity was protective against marijuana use at both high and mean levels of acculturation, but not at low levels of acculturation. CONCLUSIONS: The protective effects of religiosity on alcohol use and problems varied across Caucasian and Asian American college students, and religiosity protected against alcohol problems and marijuana use only among more acculturated Asian Americans. These findings underscore the need to examine culturally-specific correlates of substance use outcomes among Asian Americans. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: *Acculturation
 Adolescent
 "*Asian Americans/eh [Ethnology]"
 "Asian Americans/px [Psychology]"
 "Continental Population Groups/eh [Ethnology]"
 Cross-Sectional Studies
 "Data Collection/mt [Methods]"
 Female
 Humans
 Male
 *Religion
 "Students/px [Psychology]"

*Students
 "Substance-Related Disorders/di [Diagnosis]"
 "*Substance-Related Disorders/eh [Ethnology]"
 *Universities
 Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

58. Gender differences in socio-demographic and clinical characteristics of methamphetamine inpatients in a Chinese population.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(94-100), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): He J; Xie Y; Tao J; Su H; Wu W; Zou S; Zhang J; Zhang J; Zhang H; Yang X; Guo J; Tang W; Zhang F; Liu J; Liu L; Chen Y; Wen N; Kosten TR; Zhang XY

Institution: The First Affiliated Hospital, Wenzhou Medical College, Wenzhou 325000, China.

Language: English

Abstract: BACKGROUND: Over the past two decades, China has experienced a dramatic increase in methamphetamine (MA) abuse. This study examined gender-specific socio-demographic and clinical characteristics of MA use among Han Chinese, which has previously received little systematic study. METHODS: This analysis described MA-related socio-demographic and clinical characteristics in a broad cross-sectional sample (n=1464; male/female=1185/279), and examined differences between males and females in MA use history, MA initiation, MA-related subjective feelings and behaviors, and withdrawal symptoms. RESULTS: Most MA abusers (about 72%) were young (in their 20s or 30s), with women being 5 years younger than men on average. More males (33.2%) were married than females (21.9%). The average body mass index (BMI) was significantly lower in this MA abuser sample compared to the age-matched healthy controls. Moreover, the BMI of females was significantly lower than that of males. The laboratory tests showed that the blood levels of glucose, cholesterol and triglyceride were all significantly higher in males than females. Females used MA at a younger age compared to males. The most frequent route of MA use was smoking (90.9%). Males were more likely to use another drug, and more likely to be hospitalized. However, many characteristics and behaviors of MA use are similar for males and females, including the route, the dose and duration of MA use, and relapse status. CONCLUSION: Although there were some male-female similarities in MA use parameters, significant differences do exist that may have implications for gender-specific research as well as for prevention and treatment strategies. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 44RAL3456C (Methamphetamine)

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
 Adult
 "Amphetamine-Related Disorders/ec [Economics]"
 "*Amphetamine-Related Disorders/eh [Ethnology]"
 "Amphetamine-Related Disorders/th [Therapy]"
 "*Asian Continental Ancestry Group/eh [Ethnology]"
 Body Mass Index
 Female
 "Hospitalization/td [Trends]"
 *Hospitalization
 Humans
 Male
 *Methamphetamine
 Middle Aged
 "Population Surveillance/mt [Methods]"

Retrospective Studies
 *Sex Characteristics
 Socioeconomic Factors
 "*Substance Abuse Treatment Centers/mt [Methods]"
 "Substance Abuse Treatment Centers/td [Trends]"
 Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

59. Fine-grain analysis of the treatment effect of topiramate on methamphetamine addiction with latent variable analysis.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(45-51), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Ma JZ; Johnson BA; Yu E; Weiss D; McSherry F; Saadvandi J; Iturriaga E; Ait-Daoud N; Rawson RA; Hrymoc M; Campbell J; Gorodetzky C; Haning W; Carlton B; Mawhinney J; Weis D; McCann M; Pham T; Stock C; Dickinson R; Elkashef A; Li MD

Institution: Department of Public Health Sciences, University of Virginia, PO Box 800717, Charlottesville, VA 22908, USA. jzm4h@virginia.edu

Language: English

Abstract: BACKGROUND: As reported previously, 140 methamphetamine-dependent participants at eight medical centers in the U.S. were assigned randomly to receive topiramate (N=69) or placebo (N=71) in a 13-week clinical trial. The study found that topiramate did not appear to reduce methamphetamine use significantly for the primary outcome (i.e., weekly abstinence from methamphetamine in weeks 6-12). Given that the treatment responses varied considerably among subjects, the objective of this study was to identify the heterogeneous treatment effect of topiramate and determine whether topiramate could reduce methamphetamine use effectively in a subgroup of subjects. METHODS: Latent variable analysis was used for the primary and secondary outcomes during weeks 6-12 and 1-12, adjusting for age, sex, and ethnicity. RESULTS: Our analysis of the primary outcome identified 30 subjects as responders, who either reduced methamphetamine use consistently over time or achieved abstinence. Moreover, topiramate recipients had a significantly steeper slope in methamphetamine reduction and accelerated to abstinence faster than placebo recipients. For the secondary outcomes in weeks 6-12, we identified 40 subjects as responders (who had significant reductions in methamphetamine use) and 65 as non-responders; topiramate recipients were more than twice as likely as placebo recipients to be responders (odds ratio=2.67; p=0.019). Separate analyses of the outcomes during weeks 1-12 yielded similar results. CONCLUSIONS: Methamphetamine users appear to respond to topiramate treatment differentially. Our findings show an effect of topiramate on the increasing trend of abstinence from methamphetamine, suggesting that a tailored intervention strategy is needed for treating methamphetamine addiction. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0H73WJJ391 (topiramate); 30237-26-4 (Fructose); 44RAL3456C (Methamphetamine)

Publication Type: Journal Article; Multicenter Study; Randomized Controlled Trial; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: Adolescent
 Adult
 "*Amphetamine-Related Disorders/di [Diagnosis]"
 "*Amphetamine-Related Disorders/dt [Drug Therapy]"
 "Amphetamine-Related Disorders/ep [Epidemiology]"
 "*Behavior Addictive/di [Diagnosis]"
 "*Behavior Addictive/dt [Drug Therapy]"
 "Behavior Addictive/ep [Epidemiology]"
 Female
 "*Fructose/aa [Analogues and Derivatives]"

"Fructose/tu [Therapeutic Use]"
 Humans
 Male
 "Methamphetamine/ae [Adverse Effects]"
 *Methamphetamine
 Middle Aged
 Time Factors
 Treatment Outcome
 Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

60. Multidimensional family therapy lowers the rate of cannabis dependence in adolescents: a randomised controlled trial in Western European outpatient settings.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(85-93), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Rigter H; Henderson CE; Pelc I; Tossmann P; Phan O; Hendriks V; Schaub M; Rowe CL

Institution: Department of Public Health, Erasmus MC, 3000 CA Rotterdam, The Netherlands. rigter.h@kpnmail.nl

Language: English

Abstract: BACKGROUND: Noticing a lack of evidence-based programmes for treating adolescents heavily using cannabis in Europe, government representatives from Belgium, France, Germany, The Netherlands, and Switzerland decided to have U.S.-developed multidimensional family therapy (MDFT) tested in their countries in a trans-national trial, called the International Need for Cannabis Treatment (INCANT) study. METHODS: INCANT was a 2 (treatment condition)x5 (time) repeated measures intent-to-treat randomised effectiveness trial comparing MDFT to Individual Psychotherapy (IP). Data were gathered at baseline and 3, 6, 9 and 12 months thereafter. Study participants were recruited at outpatient secondary level addiction, youth, and forensic care clinics in Brussels, Berlin, Paris, The Hague, and Geneva. Participants were adolescents from 13 through 18 years of age with a recent cannabis use disorder. 85% were boys; 40% were of foreign descent. One-third had been arrested for a criminal offence in the past 3 months. Three primary outcomes were assessed: (1) treatment retention, (2) prevalence of cannabis use disorder and (3) 90-day frequency of cannabis consumption. RESULTS: Positive outcomes were found in both the MDFT and IP conditions. MDFT outperformed IP on the measures of treatment retention ($p < 0.001$) and prevalence of cannabis dependence ($p = 0.015$). MDFT reduced the number of cannabis consumption days more than IP in a subgroup of adolescents reporting more frequent cannabis use ($p = 0.002$). CONCLUSIONS: Cannabis use disorder was responsive to treatment. MDFT exceeded IP in decreasing the prevalence of cannabis dependence. MDFT is applicable in Western European outpatient settings, and may show moderately greater benefits than IP in youth with more severe substance use. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Clinical Trial, Phase III; Journal Article; Multicenter Study; Randomized Controlled Trial

Subject Headings: Adolescent
 "*Ambulatory Care/mt [Methods]"
 "Ambulatory Care/td [Trends]"
 "Europe/ep [Epidemiology]"
 "*Family Therapy/mt [Methods]"
 "Family Therapy/td [Trends]"
 Female
 Follow-Up Studies
 Humans
 Male
 "Marijuana Abuse/di [Diagnosis]"

"*Marijuana Abuse/ep [Epidemiology]"
 "*Marijuana Abuse/th [Therapy]"
 Pilot Projects
 "*Substance Abuse Treatment Centers/mt [Methods]"
 "Substance Abuse Treatment Centers/td [Trends]"
 Treatment Outcome

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

61. Decision-making deficits are still present in heroin abusers after short- to long-term abstinence.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(61-7), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Li X; Zhang F; Zhou Y; Zhang M; Wang X; Shen M

Institution: Department of Psychology and Behavioural Sciences, Zhejiang University, 310028, PR China.

Language: English

Abstract: BACKGROUND: Substance dependent individuals (SDIs) consistently show deficits in decision making with biased choices toward immediate rewards, even at the expense of future consequences. However, relatively little evidence has been reported concerning the population of drug abusers who are exclusively addicted to heroin. METHODS: The present study tested 124 male abstinent "pure" heroin (AH) abusers (divided into short-term, mid-term, and long-term groups based on their length of abstinence) and 43 healthy controls (HC) intending to address this issue. Two decision-making tasks, the Delay Discounting Task (DDT) and the Iowa Gambling Task (IGT) were employed to measure their decision-making performance. RESULTS: Compared to HC participants, AH participants made significantly poorer choices on both the DDT and the IGT and the poor decision-making performances were not influenced by their lengths of abstinence. It is suggested that heroin-abuse-related decision-making deficits that are demonstrated by rapidly discounting future rewards; preferring incentives with large short-term gains while ignoring accompanying potential risks; and being inflexible in adjusting decision-making behaviors in accordance with outcome feedback, may not be compensated for even after a long period of abstinence from heroin abuse. CONCLUSION: Hence, this inability to recover should be taken into consideration in the evaluation, prevention and intervention of heroin abuse and relapse. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
 Adult
 "Decision Making/ph [Physiology]"
 *Decision Making
 Female
 "Heroin Dependence/di [Diagnosis]"
 "*Heroin Dependence/px [Psychology]"
 Humans
 Male
 "Psychomotor Performance/ph [Physiology]"
 *Psychomotor Performance
 Time Factors
 Young Adult

Source: MEDLINE

Full Text: Available from *Elsevier* in *Drug and Alcohol Dependence*

62. Drug spend and acquisitive offending by substance misusers.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(24-9), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Hayhurst KP; Jones A; Millar T; Pierce M; Davies L; Weston S; Donmall M

Institution: National Drug Evidence Centre, University of Manchester, Manchester M13 9PL, UK. karen.hayhurst@manchester.ac.uk

Language: English

Abstract: AIM: The need to generate income to fund drug misuse is assumed to be a driver of involvement in acquisitive crime. We examined the influence of drug misuse expenditure, and other factors, on acquisitive offending. METHODS: Clients (N=1380) seeking drug treatment within 94 of 149 Drug Action Teams (DATs) across England completed a comprehensive survey, incorporating validated scales and self-report measures, such as levels of drug and alcohol use and offending. RESULTS: Forty per cent (N=554) had committed acquisitive crime in the previous month. Regression analysis showed that acquisitive offending was associated with the presence of problematic use of crack cocaine, poly-drug use, sharing injecting equipment, unsafe sex, overdose risk, higher drug spend, unemployment, reduced mental wellbeing, and younger age. CONCLUSIONS: Rates of acquisitive crime among drug users are high. Drug using offenders can be distinguished from drug using non-offenders by problematic crack cocaine use, younger age, income-related factors, and indicators of a chaotic life style and complex needs. Behavioural and demographic factors were associated more strongly with acquisitive crime than drug use expenditure, suggesting that the need to finance drug use is not necessarily the main factor driving acquisitive offending by drug users. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Street Drugs)

Publication Type: Journal Article; Multicenter Study; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[Cohort Studies](#)
["*Crime/ec \[Economics\]"](#)
["*Crime/td \[Trends\]"](#)
["England/ep \[Epidemiology\]"](#)
[Female](#)
[Humans](#)
[Longitudinal Studies](#)
[Male](#)
["*Street Drugs/ec \[Economics\]"](#)
["*Substance-Related Disorders/ec \[Economics\]"](#)
["*Substance-Related Disorders/ep \[Epidemiology\]"](#)
[Young Adult](#)

Source: MEDLINE

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

63. Polysubstance and alcohol dependence: unique abnormalities of magnetic resonance-derived brain metabolite levels.

Citation: Drug & Alcohol Dependence, June 2013, vol./is. 130/1-3(30-7), 0376-8716;1879-0046 (2013 Jun 1)

Author(s): Abe C; Mon A; Durazzo TC; Pennington DL; Schmidt TP; Meyerhoff DJ

Institution: Department of Radiology and Biomedical Imaging, University of California, San Francisco and Center for Imaging of Neurodegenerative Diseases, Veterans Administration Medical Center San Francisco, CA 94121, USA. christoph.abe@gmail.com

Language: English

Abstract: BACKGROUND: Although comorbid substance misuse is common in alcohol dependence, and polysubstance abusers (PSU) represent the largest group of individuals seeking treatment for drug abuse today, we know little about potential brain abnormalities in this population. Brain magnetic resonance spectroscopy studies of mono-substance use disorders (e.g., alcohol or cocaine) reveal abnormal levels of cortical metabolites (reflecting neuronal integrity, cell membrane turnover/synthesis, cellular bioenergetics, gliosis) and altered concentrations of glutamate and -aminobutyric acid (GABA). The concurrent misuse of several substances may have unique and different effects on brain biology and function compared to any mono-substance misuse. METHODS: High field brain magnetic resonance spectroscopy at 4 T and neurocognitive testing were performed at one month of abstinence in 40 alcohol dependent individuals (ALC), 28 alcohol dependent PSU and 16 drug-free controls. Absolute metabolite concentrations were calculated in anterior cingulate (ACC), parieto-occipital (POC) and dorso-lateral prefrontal cortices (DLPFC). RESULTS: Compared to ALC, PSU demonstrated significant metabolic abnormalities in the DLPFC and strong trends to lower GABA in the ACC. Metabolite levels in ALC and light drinking controls were statistically equivalent. Within PSU, lower DLPFC GABA levels are related to greater cocaine consumption. Several cortical metabolite concentrations were associated with cognitive performance. CONCLUSIONS: While metabolite concentrations in ALC at one month of abstinence were largely normal, PSU showed persistent and functionally significant metabolic abnormalities, primarily in the DLPFC. Our results point to specific metabolic deficits as biomarkers in polysubstance misuse and as targets for pharmacological and behavioral PSU-specific treatment. Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Multicenter Study; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: [Adult](#)
["Alcoholism/di \[Diagnosis\]"](#)
["Alcoholism/me \[Metabolism\]"](#)
["*Brain/me \[Metabolism\]"](#)
[Cohort Studies](#)
[Female](#)
[Humans](#)
["Magnetic Resonance Imaging/mt \[Methods\]"](#)
[*Magnetic Resonance Imaging](#)
[Male](#)
[Middle Aged](#)
["Substance Abuse Treatment Centers/mt \[Methods\]"](#)
["*Substance-Related Disorders/di \[Diagnosis\]"](#)
["*Substance-Related Disorders/me \[Metabolism\]"](#)

Source: MEDLINE

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

64. Does take-home naloxone reduce non-fatal overdose?.

Citation: Lancet, January 2014, vol./is. 383/9912(124-5), 0140-6736;1474-547X (2014 Jan 11)

Author(s): Bennett T; Holloway K; Bird SM

Institution: University of South Wales, Centre for Criminology, Pontypridd, UK.; University of South Wales, Centre for Criminology, Pontypridd, UK.; MRC Biostatistics Unit, Cambridge CB2 0SR, UK. Electronic address: sheila.bird@mrc-bsu.cam.ac.uk.

Language: English

Country of Publication: England

CAS Registry Number: 0 (Narcotic Antagonists); 36B82AMQ7N (Naloxone)

Publication Type: Letter

Subject Headings: "*Drug Overdose/pc [Prevention and Control]"
 Humans
 "*Naloxone/ad [Administration and Dosage]"
 "*Narcotic Antagonists/ad [Administration and Dosage]"
 Wales

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Full Text: Available from *Lancet* in *Newcomb Library & Information Service*
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