

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. A comparison of substance dependence treatment information system in America, England, and Iran.

- Citation:** Journal of Education & Health Promotion, 2014, vol./is. 3/(17), 2277-9531;2277-9531 (2014)
- Author(s):** Ajami S; Mellat-Karkevandi Z; Saghaeiannejad-Isfahani S; Salehi M; Jahanbakhsh M
- Institution:** Departments of Health Information Technology and Management, Health Management and Economics Research Center, Isfahan.; School of Medical Management and Information Sciences, Isfahan University of Medical Sciences, Isfahan.; School of Medical Management and Information Sciences, Isfahan University of Medical Sciences, Isfahan.; Department of Psychiatry, School of Medicine, Isfahan University of Medical Sciences, Isfahan.; School of Medical Management and Information Sciences, Isfahan University of Medical Sciences, Isfahan.
- Language:** English
- Abstract:** CONTEXT: Addiction, as a social problem, is a phenomenon that causes structural changes in cultural, social, political, and economic system in society. Prevention of this problem means decrease of risk factors and increase of protective factors; and recognition of these factors is possible with the help of update, accurate, and complete information in information systems. AIMS: The aim of this study was to compare substance dependence treatment information system (SDTIS) in America, England, and Iran. MATERIALS AND METHODS: This research was an applied and comparison-descriptive study, in which SDTIS was compared in America, England, and Iran. These countries were chosen based on available information on the Internet and also on the development of these countries in the health information management field. Information resources included library resources, electronic resources, and expert people (Health Information Management, Medical Records Education, Psychologist, Psychiatrist, and Medical Informatics). The data collection tool was the data raw form, whose reliability was proved by expert people. STATISTICAL ANALYSIS USED: Findings were analyzed by theory and descriptive method. RESULTS: America and England had the SDTIS. Their systems had special characteristics such as goals, scope, special method for collecting, processing, reporting, quality and validity control, and confidentiality principles. However, there was no such system in Iran and the present situation in Iran has many differences with similar situations in the studied countries. CONCLUSION: Presence of an information system in the substance dependence treatment field helps to prevent, control, and treat addicted people. Hence, we try to submit a suitable model for implementing this system.
- Country of Publication:** India
- Publication Type:** Journal Article
- Subject Headings:**
- Source:** MEDLINE

2. Impact of new UK paracetamol overdose guidelines on patients presenting to the emergency department.

- Citation:** Irish Medical Journal, February 2014, vol./is. 107/2(47-8), 0332-3102;0332-3102 (2014 Feb)
- Author(s):** Nfila G; Lee S; Binchy J
- Language:** English
- Abstract:** Paracetamol is involved in a large proportion of overdoses that present to the Emergency Department (ED), either as lone or mixed overdoses. Non-treatment of toxic levels can lead to fulminant liver failure. This study is to determine the impact the new UK treatment guidelines will have on patients presenting with paracetamol overdose. A retrospective review was performed on all patients who had paracetamol levels done in the ED between September 2011 and August 2012. A total of 523 patients were identified, 95 (18%) of whom had detectable paracetamol levels. 74 patients from the 95 were evaluated. 18 (24%) patients were treated with N-acetylcysteine as per the then paracetamol overdose guidelines. Using the new guidelines would have resulted in 3 more patients being admitted. Our study shows that most patients who present following

paracetamol overdose do not require treatment with N-acetylcysteine and suggests that the introduction of the new UK treatment guidelines is likely to result in only a small increase in the number of patients requiring treatment.

Country of Publication: Ireland

CAS Registry Number: 0 (Analgesics, Non-Narcotic); 362O9ITL9D (Acetaminophen)

Publication Type: Comparative Study; Journal Article

Subject Headings: "Acetaminophen/ad [Administration and Dosage]"
 "*Acetaminophen/po [Poisoning]"
 Adolescent
 Adult
 Aged
 "Analgesics Non-Narcotic/ad [Administration and Dosage]"
 "Analgesics Non-Narcotic/po [Poisoning]"
 "Drug Overdose/ep [Epidemiology]"
 "Drug Overdose/et [Etiology]"
 "*Drug Overdose/pc [Prevention and Control]"
 "Emergency Service Hospital/sn [Statistics and Numerical Data]"
 *Emergency Service Hospital
 Female
 "Great Britain/ep [Epidemiology]"
 *Guideline Adherence
 Humans
 Male
 Middle Aged
 *Practice Guidelines as Topic
 Retrospective Studies
 Young Adult

Source: MEDLINE

3. Emergence of opiate-induced neonatal abstinence syndrome.

Citation: Irish Medical Journal, February 2014, vol./is. 107/2(46), 0332-3102;0332-3102 (2014 Feb)

Author(s): Healy D; English F; Daniels A; Ryan CA

Language: English

Abstract: Neonatal abstinence syndrome (NAS) is the clinical picture of infants withdrawing from in-utero substance exposure. The incidence of NAS rose in Dublin maternity hospitals in the 1970's and '80's in parallel with increasing in opiate abuse in that city. The purpose of this study was to determine if a similar pattern was emerging in Cork University Maternity Hospital. Data from the Erinville Hospital (2000-2007) and CUMH (2008-2011) were compared. Sixteen cases of NAS were identified, two at Erinville Hospital (22,987 deliveries; incidence = 0.09/1000 deliveries) and 14 at CUMH (37,414 deliveries; incidence = 0.38/1000 deliveries; $p < 0.01$). Five of the 16 mothers were using heroin, while ten were on methadone maintenance. All were multi-drug abusers. Newborns requiring pharmacotherapy for NAS (5/16) had prolonged hospitalisations compared to those requiring supportive care. NAS in Cork is increasing. Primary, secondary and tertiary preventative measures are warranted to prevent further escalation.

Country of Publication: Ireland

CAS Registry Number: 0 (Narcotics)

Publication Type: Comparative Study; Journal Article; Multicenter Study

Subject Headings: Adult
 Female
 Follow-Up Studies
 Humans
 Incidence

Infant Newborn
 "Ireland/ep [Epidemiology]"
 Male
 Mothers
 "*Narcotics/ae [Adverse Effects]"
 "*Neonatal Abstinence Syndrome/ep [Epidemiology]"
 "Neonatal Abstinence Syndrome/et [Etiology]"
 "*Opioid-Related Disorders/co [Complications]"
 Pregnancy
 *Pregnancy Complications
 Prognosis
 Retrospective Studies
 Young Adult

Source: MEDLINE

4. Towards a framework for implementing evidence based alcohol interventions.

Citation: Irish Medical Journal, February 2014, vol./is. 107/2(39-41), 0332-3102;0332-3102 (2014 Feb)

Author(s): Armstrong R; Barry J

Language: English

Abstract: Alcohol is ranked as the eighth leading cause of death globally and is a causal factor in more than sixty major types of diseases and injuries and results in approximately 2.5 million deaths a year. This study tested the feasibility of screening and brief intervention (SBI) within four emergency departments. A total of 944 patients were screened for hazardous and harmful alcohol use. The results showed that there was good co-operation from the public with 888 (94%) people agreeing to be screened. The screening tool detected that 460 (49%) of those needed no intervention, 345 (36%) needed brief advice and 83 (9%) required referral to specialist services. This showed the value of the screening but also helped to reassure staff that people were happy to take part.

Country of Publication: Ireland

CAS Registry Number: 3K9958V90M (Ethanol)

Publication Type: Comparative Study; Journal Article; Multicenter Study

Subject Headings: Adult
 "*Alcoholism/di [Diagnosis]"
 "Alcoholism/ep [Epidemiology]"
 *Emergency Service Hospital
 "*Ethanol/ae [Adverse Effects]"
 "*Evidence-Based Medicine/mt [Methods]"
 Female
 "Great Britain/ep [Epidemiology]"
 Humans
 Incidence
 Male
 "*Mass Screening/mt [Methods]"
 Middle Aged
 Pilot Projects
 *Referral and Consultation
 Retrospective Studies
 "Survival Rate/td [Trends]"

Source: MEDLINE

5. Results of data gathered at a smoking cessation counselling stand in the Dublin Dental University Hospital on Mouth Cancer Awareness Day 2012.

Citation: Journal of the Irish Dental Association, December 2013, vol./is. 59/6(308-10), 0021-1133;0021-1133 (2013 Dec-2014 Jan)

Author(s): Waldron C; Cronin O; Guray A; Hynes A; McGovern C; Ryan M

Institution: Dublin Dental University Hospital. catherine.waldron@dental.tcd.ie; Dublin Dental University Hospital.; Dublin Dental University Hospital.; Dublin Dental University Hospital.; Dublin Dental University Hospital.; Dublin Dental University Hospital.

Language: English

Abstract: INTRODUCTION: The addictive aspect of smoking is well acknowledged. Research has shown that interventions by healthcare professionals have been shown to be effective and that smokers will benefit from smoking cessation counselling before, during and after their quit attempts. Dental hygienists, as part of the healthcare team, are well positioned to provide this counselling.MATERIAL AND METHODS: A questionnaire was completed by patients, staff, students and members of the public, during Mouth Cancer Awareness Day 2012 in the Dublin Dental University Hospital to assess the prevalence of smoking as well as the history of smoking and quit attempts by current and former smokers.RESULTS: The prevalence of smoking was lower than the national average. A total of 18.3% of those surveyed were smokers, 25% were former smokers, and 68% of the smokers had their first cigarette within 30 minutes of waking, indicating high dependence.DISCUSSION AND CONCLUSIONS: The majority of the smokers (79%) had attempted to quit. Stress was the most common reason for lapsing. The most common reasons for smoking cessation were health issues. The public is well disposed to receive information regarding smoking and the methods available to quit by healthcare professionals on health awareness days such as Mouth Cancer Awareness Day.

Country of Publication: Ireland

Publication Type: Journal Article

Subject Headings: [Adolescent](#)
[Adult](#)
[Aged](#)
[Health Promotion](#)
[Humans](#)
["Ireland/ep \[Epidemiology\]"](#)
[Middle Aged](#)
["Mouth Neoplasms/pc \[Prevention and Control\]"](#)
[Prevalence](#)
["*Smoking/ep \[Epidemiology\]"](#)
["*Smoking Cessation/sn \[Statistics and Numerical Data\]"](#)
["Tobacco Use Disorder/ep \[Epidemiology\]"](#)
[Young Adult](#)

Source: MEDLINE

6. Cortical and subcortical volumes in adolescents with alcohol dependence but without substance or psychiatric comorbidities.

Citation: Psychiatry Research, October 2013, vol./is. 214/1(1-8), 0165-1781;1872-7123 (2013 Oct 30)

Author(s): Fein G; Greenstein D; Cardenas VA; Cuzen NL; Fouche JP; Ferrett H; Thomas K; Stein DJ

Institution: Neurobehavioral Research Inc., Honolulu, HI, United States. george@nbresearch.com

Language: English

Abstract: Most prior studies of the effects of excessive alcohol intake on the adolescent brain examined alcohol-use-dependent samples with comorbid psychiatric and substance use disorders. In the Cape Town region, we identified a sizeable cohort of adolescents with alcohol use disorders (AUD) without externalizing or other psychiatric disorders. We examined brain morphology in 64 such adolescents compared to age- and gender-matched healthy controls. Magnetic resonance imaging data were analyzed using FSL's FIRST software for subcortical volumes, and cortical gray matter (GM) was analyzed using voxel-based morphometry (VBM) and regions of interest (ROI) analysis. AUD boys had

smaller thalamic and putamen volumes compared to non-drinking boys, while AUD girls had larger thalamic and putamen volumes compared to non-drinking girls. VBM revealed a large region of decreased GM density in AUDs compared to controls located in the left lateral frontal, temporal, and parietal lobes, extending medially deep into the parietal lobe. Smaller GM volume in this region was also present when examined using ROI analysis. Our lack of findings in other brain regions, particularly the hippocampus, suggests that reports of smaller brain volumes in adolescent AUDs in the literature are a consequence of psychiatric and substance abuse comorbidities. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

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

Subject Headings: Adolescent
 "*Alcoholism/pa [Pathology]"
 "Alcoholism/px [Psychology]"
 "*Brain/pa [Pathology]"
 Female
 Humans
 Image Processing Computer-Assisted
 Magnetic Resonance Imaging
 Male
 Neuropsychological Tests
 Organ Size
 Questionnaires
 South Africa

Source: MEDLINE

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

7. Cannabis abuse is associated with better emotional memory in schizophrenia: a functional magnetic resonance imaging study.

Citation: Psychiatry Research, October 2013, vol./is. 214/1(24-32), 0165-1781;1872-7123 (2013 Oct 30)

Author(s): Bourque J; Mendrek A; Durand M; Lakis N; Lipp O; Stip E; Lalonde P; Grignon S; Potvin S

Institution: Centre de recherche Fernand-Seguin, Montreal, QC, Canada.

Language: English

Abstract: In schizophrenia cannabis abuse/dependence is associated with poor compliance and psychotic relapse. Despite this, the reasons for cannabis abuse remain elusive, but emotions may play a critical role in this comorbidity. Accordingly, we performed a functional magnetic resonance imaging study of emotional memory in schizophrenia patients with cannabis abuse (dual-diagnosis, DD). Participants comprised 14 DD patients, 14 non-abusing schizophrenia patients (SCZ), and 21 healthy controls (HC) who had to recognize positive and negative pictures while being scanned. Recognition of positive and negative emotions was prominently impaired in SCZ patients, relative to HC, while differences between DD and HC were smaller. For positive and negative stimuli, we observed significant activations in frontal, limbic, temporal and occipital regions in HC; in frontal, limbic and temporal regions in DD; and in temporal, parietal, limbic and occipital regions in the SCZ group. Our results suggest that emotional memory and prefrontal lobe functioning are preserved in DD relative to SCZ patients. These results are consistent with previous findings showing that cannabis abuse is associated with fewer negative symptoms and better cognitive functioning in schizophrenia. Longitudinal studies will need to determine whether the relative preservation of emotional memory is primary or secondary to cannabis abuse in schizophrenia. 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
 Adult
 "*Brain/pp [Physiopathology]"
 Brain Mapping
 Diagnosis Dual (Psychiatry)
 "*Emotions/ph [Physiology]"
 Functional Neuroimaging
 Humans
 Image Processing Computer-Assisted
 Magnetic Resonance Imaging
 Male
 "Marijuana Abuse/co [Complications]"
 "Marijuana Abuse/pp [Physiopathology]"
 "*Marijuana Abuse/px [Psychology]"
 "*Memory/ph [Physiology]"
 Middle Aged
 Neuropsychological Tests
 "Schizophrenia/co [Complications]"
 "*Schizophrenia/pp [Physiopathology]"
 Schizophrenic Psychology

Source: MEDLINE

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

8. The size, burden and cost of disorders of the brain in the UK.

Citation: Journal of Psychopharmacology, September 2013, vol./is. 27/9(761-70), 0269-8811;1461-7285 (2013 Sep)

Author(s): Fineberg NA; Haddad PM; Carpenter L; Gannon B; Sharpe R; Young AH; Joyce E; Rowe J; Wellsted D; Nutt DJ; Sahakian BJ

Institution: Hertfordshire Partnership NHS University Foundation Trust, Queen Elizabeth II Hospital, Welwyn Garden City, UK. kiri_researchhpft@yahoo.com

Language: English

Abstract: AIM: The aim of this paper is to increase awareness of the prevalence and cost of psychiatric and neurological disorders (brain disorders) in the UK.METHOD: UK data for 18 brain disorders were extracted from a systematic review of European epidemiological data and prevalence rates and the costs of each disorder were summarized (2010 values).RESULTS: There were approximately 45 million cases of brain disorders in the UK, with a cost of 134 billion per annum. The most prevalent were headache, anxiety disorders, sleep disorders, mood disorders and somatoform disorders. However, the five most costly disorders (million) were: dementia: 22,164; psychotic disorders: 16,717; mood disorders: 19,238; addiction: 11,719; anxiety disorders: 11,687. Apart from psychosis, these five disorders ranked amongst those with the lowest direct medical expenditure per subject (<3000). The approximate breakdown of costs was: 50% indirect costs, 25% direct non-medical and 25% direct healthcare costs.DISCUSSION: The prevalence and cost of UK brain disorders is likely to increase given the ageing population. Translational neurosciences research has the potential to develop more effective treatments but is underfunded. Addressing the clinical and economic challenges posed by brain disorders requires a coordinated effort at an EU and national level to transform the current scientific, healthcare and educational agenda.

Country of Publication: United States

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

Subject Headings: Adolescent
 Adult
 Aged
 Aged 80 and over
 Brain

["*Brain Diseases/ec \[Economics\]"](#)
["*Brain Diseases/ep \[Epidemiology\]"](#)
[Child](#)
[Child Preschool](#)
[Cost of Illness](#)
["Delivery of Health Care/ec \[Economics\]"](#)
["Great Britain/ep \[Epidemiology\]"](#)
[Health Care Costs](#)
[Humans](#)
["*Mental Disorders/ec \[Economics\]"](#)
["*Mental Disorders/ep \[Epidemiology\]"](#)
[Middle Aged](#)
[Prevalence](#)
[Young Adult](#)

Source: MEDLINE

Full Text: Available from *Highwire Press* in *Journal of Psychopharmacology*

9. 4-Methyl-amphetamine: a health threat for recreational amphetamine users.

Citation: Journal of Psychopharmacology, September 2013, vol./is. 27/9(817-22), 0269-8811;1461-7285 (2013 Sep)

Author(s): Blanckaert P; van Amsterdam J; Brunt T; van den Berg J; Van Durme F; Maudens K; van Bussel J

Institution: Belgian Early Warning System on Drugs, Scientific Institute of Public Health, Brussels, Belgium. peter.blanckaert@hotmail.com

Language: English

Abstract: 4-Methylamphetamine (4-MA) was originally developed as an appetite suppressant, but development was halted due to side effects. It has recently resurfaced as a new psychoactive substance in Europe, and is mostly found together with amphetamine. Around 11.5% of tested Dutch speed samples were positive for 4-MA. In Belgium, 4-MA was also found in speed samples. In 2011 and 2012, several fatal incidents after amphetamine use were observed in Belgium, the United Kingdom and The Netherlands. In all victims, toxicological analysis confirmed the presence of 4-MA, in addition to amphetamine. The observed blood amphetamine levels were too low to be fatal. Contrary to amphetamine, which displays noradrenergic and dopaminergic activity, 4-MA also shows serotonergic activity, which may contribute to the observed toxicity. Other mechanisms of toxicity are put forward in this paper as well. To conclude, the observed toxicity is most likely the result of the combined dopaminergic activity of amphetamine and the serotonergic activity of 4-MA. In addition, the presence of 4-MA may have dampened the psychoactive effects of amphetamine by attenuation of the amphetamine-induced dopamine release, potentially inclining users to ingest higher doses of contaminated speed. Also, slower metabolism of 4-MA and its MAO-inhibiting properties can also contribute to the unusual high toxicity of 4-MA.

Country of Publication: United States

CAS Registry Number: 0 (Dopamine Agents); 0 (Serotonin Agents); 44RAL3456C (Methamphetamine); CK833KGX7E (Amphetamine)

Publication Type: Journal Article

Subject Headings:
["*Amphetamine/ae \[Adverse Effects\]"](#)
["Amphetamine/bl \[Blood\]"](#)
["Amphetamine-Related Disorders/bl \[Blood\]"](#)
["Amphetamine-Related Disorders/ep \[Epidemiology\]"](#)
["Amphetamine-Related Disorders/et \[Etiology\]"](#)
["*Amphetamine-Related Disorders/px \[Psychology\]"](#)
["Dopamine Agents/ae \[Adverse Effects\]"](#)
["Dopamine Agents/bl \[Blood\]"](#)
["*Drug Users/px \[Psychology\]"](#)

Humans
 "*Methamphetamine/ae [Adverse Effects]"
 "Methamphetamine/bl [Blood]"
 "Netherlands/ep [Epidemiology]"
 "Serotonin Agents/ae [Adverse Effects]"
 "Serotonin Agents/bl [Blood]"
 "Substance Abuse Detection/mt [Methods]"
 "Substance Abuse Detection/px [Psychology]"

Source: MEDLINE

Full Text: Available from *Highwire Press* in *Journal of Psychopharmacology*

10. Dispelling myths about gender differences in smoking cessation: population data from the USA, Canada and Britain.

Citation: Tobacco Control, September 2013, vol./is. 22/5(356-60), 0964-4563;1468-3318 (2013 Sep)

Author(s): Jarvis MJ; Cohen JE; Delnevo CD; Giovino GA

Institution: Department of Epidemiology and Public Health, University College London, London, UK. martin.jarvis@ucl.ac.uk

Language: English

Abstract: OBJECTIVES: Based mainly on findings from clinical settings, it has been claimed that women are less likely than men to quit smoking successfully. If true, this would have important implications for tobacco control interventions. The authors aimed to test this possibility using data from general population surveys. METHODS: The authors used data from major national surveys conducted in 2006-2007 in the USA (Tobacco Use Supplement to the Current Population Survey), Canada (Canadian Tobacco Use Monitoring Survey) and the UK (General Household Survey) to estimate rates of smoking cessation by age in men and women. RESULTS: The authors found a pattern of gender differences in smoking cessation which was consistent across countries. Below age 50, women were more likely to have given up smoking completely than men, while among older age groups, men were more likely to have quit than women. Across all age groups, there was relatively little difference in cessation between the sexes. CONCLUSIONS: Conclusions about gender differences in smoking cessation should be based on evidence from the general population rather than from atypical clinical samples. This study has found convincing evidence that men in general are not more likely to quit smoking successfully than women.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: Adolescent
 Adult
 Aged
 "Canada/ep [Epidemiology]"
 *Epidemiologic Research Design
 Female
 "Great Britain/ep [Epidemiology]"
 Health Surveys
 Humans
 Male
 Middle Aged
 Sex Factors
 "*Smoking/ep [Epidemiology]"
 "*Smoking Cessation/sn [Statistics and Numerical Data]"
 Tobacco Use Disorder
 "United States/ep [Epidemiology]"
 Young Adult

Source: MEDLINE

Full Text: Available from *Highwire Press* in *Tobacco control*

11. Regulating impaired doctors: a snapshot from New South Wales.

Citation: Journal of Law & Medicine, December 2013, vol./is. 21/2(429-40), 1320-159X;1320-159X (2013 Dec)

Author(s): Kiel H

Institution: Medical Council of New South Wales, Australia. hkiel@ozemail.com.au

Language: English

Abstract: This article examines the regulation of impaired doctors in Australia and explores the inherent tensions in the new Health Practitioner Regulation National Law in attempting to both treat the doctor and protect the public. It discusses both informal and formal mechanisms of regulation with particular reference to therapeutic jurisprudence and mandatory notification. It focuses particularly on New South Wales and examines all the impairment cases which resulted in disciplinary proceedings in the Medical Tribunal of New South Wales in 2010. It identifies the most common forms of impairment and discusses the particular challenges that impaired doctors pose for regulators.

Country of Publication: Australia

Publication Type: Journal Article

Subject Headings: "Cognition Disorders/di [Diagnosis]"
Humans
"Licensure Medical/lj [Legislation and Jurisprudence]"
New South Wales
"Paranoid Disorders/th [Therapy]"
"Patient Advocacy/lj [Legislation and Jurisprudence]"
"*Physician Impairment/lj [Legislation and Jurisprudence]"
"Substance-Related Disorders/th [Therapy]"

Source: MEDLINE

12. Team-based learning for psychiatry residents: a mixed methods study.

Citation: BMC Medical Education, 2013, vol./is. 13/(124), 1472-6920;1472-6920 (2013)

Author(s): McMullen I; Cartledge J; Levine R; Iversen A

Institution: Liaison Psychiatry, South London and Maudsley NHS Foundation Trust, Guys Hospital, Weston Street, London SE1 9RT, UK. isabel.mcmullen@kcl.ac.uk.

Language: English

Abstract: BACKGROUND: Team-based learning (TBL) is an effective teaching method for medical students. It improves knowledge acquisition and has benefits regarding learner engagement and teamwork skills. In medical education it is predominately used with undergraduates but has potential benefits for training clinicians. The aims of this study were to examine the impact of TBL in a sample of psychiatrists in terms of classroom engagement, attitudes towards teamwork, learner views and experiences of TBL. METHODS: Forty-four psychiatry residents participated in an Addictions Psychiatry TBL module. Mixed-methods were used for evaluation. Self-rated measures of classroom engagement (Classroom Engagement Survey, CES) were compared with conventional lectures, and attitudes regarding the value of teams (Value of Teams Scale, VTS) were compared before and after the module. Independent t-tests were used to compare 'lecture' CES scores with TBL CES scores and pre and post scores for the VTS. Feedback questionnaires were completed. Interviews were conducted with a subset of residents and transcripts analysed using thematic analysis. RESULTS: Twenty-eight residents completed post-course measures (response rate 63.6%). Seven participants volunteered for qualitative interviews-one from each team. There was a significant difference in the mean CES score lectures compared to TBL ($p < 0.001$) but no difference was found in mean VTS score pre and post for either subscale ($p = 0.519$; $p = 0.809$). All items on the feedback questionnaire were positively rated except two regarding session

preparation. The qualitative analysis generated seven themes under four domains: 'Learning in teams', 'Impact on the individual learner', 'Relationship with the teacher' and 'Efficiency and effectiveness of the learning process'. CONCLUSIONS: In this group of residents, TBL significantly improved learner-rated classroom engagement and seemed to promote interactivity between learners. TBL was generally well-received, although required learners to prepare for class which was difficult for some. TBL did not change these clinicians' views about teamwork.

Country of Publication: England
Publication Type: Journal Article
Subject Headings: [Cooperative Behavior](#)
[Educational Measurement](#)
[Female](#)
[Great Britain](#)
[Humans](#)
["*Internship and Residency/mt \[Methods\]"](#)
[Interviews as Topic](#)
[Male](#)
["Problem-Based Learning/mt \[Methods\]"](#)
[Program Evaluation](#)
["*Psychiatry/ed \[Education\]"](#)
[Questionnaires](#)
["Teaching/mt \[Methods\]"](#)
Source: MEDLINE

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

13. Carer involvement with drug services: a qualitative study.

Citation: Health Expectations, September 2013, vol./is. 16/3(e60-72), 1369-6513;1369-7625 (2013 Sep)

Author(s): Orr LC; Barbour RS; Elliott L

Institution: School of Nursing and Midwifery, University of Dundee, Dundee, UK.
l.c.orr@dundee.ac.uk

Language: English

Abstract: BACKGROUND: Empirical research suggests that involving carers brings benefits to families and services. Consequently, drug-related policy and guidance has increasingly encouraged drug services to involve carers at all levels of service provision. OBJECTIVE: To explore the purpose and scope of carer involvement with adult drug services in North-east Scotland. DESIGN, SETTING AND PARTICIPANTS: A total of 82 participants (20 informal carers, 43 service providers and 19 policy makers) were purposively selected to take part in a qualitative study. Eight focus groups and 32 interviews were conducted between 2007 and 2008. FINDINGS: Three themes were identified through thematic coding: 'Current levels of involvement', 'Use of the term carer' and 'Opportunities for change?' Carer involvement was described as limited, unplanned and unstructured, and consisted largely of information and advice, practical and emotional support, and signposting of services. Although use of the term 'carer' was contested within and across the groups, caring in a drug context was considered the 'same but different' from caring in other contexts. Carers remained sceptical that services actually wanted to involve them in supporting their relative or to offer carers support in their own right. Many service providers and policy makers regarded carer involvement as an aspiration. CONCLUSION: Encouraging carers, service providers and policy makers to reach a shared understanding of caring in a drug context may help translation of policy into practice. However, there is also a fundamental need for drug services to widen the level and type of involvement activities on offer to carers. 2012 John Wiley & Sons Ltd.

Country of Publication: England

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

Subject Headings: Adult
 "Caregivers/og [Organization and Administration]"
 *Caregivers
 "Community Health Services/mt [Methods]"
 "Community Health Services/og [Organization and Administration]"
 Female
 Focus Groups
 "Health Planning/mt [Methods]"
 Health Policy
 Humans
 Interviews as Topic
 Male
 Middle Aged
 Policy Making
 Qualitative Research
 Scotland
 "*Substance Abuse Treatment Centers/mt [Methods]"
 "Substance Abuse Treatment Centers/og [Organization and Administration]"
 "*Substance-Related Disorders/th [Therapy]"

Source: MEDLINE

Full Text: Available from *Wiley* in *Health Expectations*

14. Impulsivity and cognitive distortions in pathological gamblers attending the UK National Problem Gambling Clinic: a preliminary report.

Citation: Psychological Medicine, December 2011, vol./is. 41/12(2625-35), 0033-2917;1469-8978 (2011 Dec)

Author(s): Michalczuk R; Bowden-Jones H; Verdejo-Garcia A; Clark L

Institution: Behavioural and Clinical Neuroscience Institute, Department of Experimental Psychology, University of Cambridge, UK.

Language: English

Abstract: BACKGROUND: Pathological gambling (PG) is a form of behavioural addiction that has been associated with elevated impulsivity and also cognitive distortions in the processing of chance, probability and skill. We sought to assess the relationship between the level of cognitive distortions and state and trait measures of impulsivity in treatment-seeking pathological gamblers. METHOD: Thirty pathological gamblers attending the National Problem Gambling Clinic, the first National Health Service clinic for gambling problems in the UK, were compared with 30 healthy controls in a case-control design. Cognitive distortions were assessed using the Gambling-Related Cognitions Scale (GRCS). Trait impulsivity was assessed using the UPPS-P, which includes scales of urgency, the tendency to be impulsive in positive or negative mood states. Delay discounting rates were taken as a state measure of impulsive choice. RESULTS: Pathological gamblers had elevated impulsivity on several UPPS-P subscales but effect sizes were largest (Cohen's $d > 1.4$) for positive and negative urgency. The pathological gamblers also displayed higher levels of gambling distortions, and elevated preference for immediate rewards, compared to controls. Within the pathological gamblers, there was a strong relationship between the preference for immediate rewards and the level of cognitive distortions ($R^2 = 0.41$). CONCLUSIONS: Impulsive choice in the gamblers was correlated with the level of gambling distortions, and we hypothesize that an impulsive decision-making style may increase the acceptance of erroneous beliefs during gambling play.

Country of Publication: England

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

Subject Headings: Adult

Case-Control Studies
 "*Cognition Disorders/px [Psychology]"
 Female
 "*Gambling/px [Psychology]"
 "Gambling/th [Therapy]"
 Great Britain
 Humans
 "*Impulsive Behavior/px [Psychology]"
 Male
 Middle Aged
 Psychiatric Status Rating Scales
 Psychological Tests
 Psychotherapy
 Reward
 Young Adult

Source: MEDLINE

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

15. Collaboration or coercion? Partnering to divert prescription opioid medications.

Citation: Journal of Urban Health, August 2013, vol./is. 90/4(758-67), 1099-3460;1468-2869 (2013 Aug)

Author(s): Green TC; Bowman SE; Ray M; Zaller N; Heimer R; Case P

Institution: Department of Emergency Medicine, Rhode Island Hospital, Providence, RI 02903, USA. traci.c.green@gmail.com

Language: English

Abstract: Diversion of prescription opioids is a widespread problem in the USA. While "doctor shopping" and pill brokering are well-described types of medication diversion, we sought to understand the social dynamic of diversion of prescription opioids and identify other diversion methods. Using qualitative data collected as part of a 12-week Rapid Assessment and Response study of prescription opioid overdose and abuse (the RARx Study) conducted in three communities in two New England states, we reviewed and thematically coded 195 interviews. Diversion took many forms: doctor shopping, pill brokering, and, most commonly, siphoning from the family medicine chest. Partnering-of patients with other "patients," of patients with "caregivers"- to obtain prescription opioids was also described. Motivations for partnering indicated doing so out of fear of violence, for financial benefit, or in exchange for transportation or other services. Partnering for prescription opioids exhibited a range of power differentials, from collaboration to coercion, and tended to involve vulnerable populations such as the elderly, disabled, or destitute. Increased awareness among health providers of the ease of access and diversion of prescription opioids is needed to promote patient safety and prevent interpersonal violence.

Country of Publication: United States

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

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

Subject Headings: Adult
 *Analgesics Opioid
 *Coercion
 "Connecticut/ep [Epidemiology]"
 *Cooperative Behavior
 Female
 Humans
 Interviews as Topic
 Male

"Opioid-Related Disorders/ep [Epidemiology]"
 "Opioid-Related Disorders/px [Psychology]"
 "Prescription Drug Diversion/px [Psychology]"
 "*Prescription Drug Diversion/sn [Statistics and Numerical Data]"
 *Prescription Drugs
 "Rhode Island/ep [Epidemiology]"

Source: MEDLINE

16. Acceptability of screening for early detection of liver disease in hazardous/harmful drinkers in primary care.

Citation: British Journal of General Practice, August 2013, vol./is. 63/613(e516-22), 0960-1643;1478-5242 (2013 Aug)

Author(s): Eyles C; Moore M; Sheron N; Roderick P; O'Brien W; Leydon GM

Institution: University of Southampton, Primary Care and Population Sciences, Aldermoor Health Centre, Southampton. cge@soton.ac.uk

Language: English

Abstract: BACKGROUND: It is estimated that one-quarter of adults in the UK drink at harmful/hazardous levels leading to increased mortality and alcohol liver disease (ALD). The Alcohol Liver Disease Detection Study (ALDDeS) aimed to test out in primary care the feasibility of alcohol misuse screening in adults, using the AUDIT questionnaire, and to assess screening harmful/hazardous alcohol users for ALD using newer non-invasive serum markers of fibrosis. AIM: To explore patients' experiences of taking part in ALDDeS and understanding of the delivery and process of screening for ALD using self-report questionnaires and feedback of liver fibrosis risk using levels of non-invasive serum markers. DESIGN AND SETTING: A nested qualitative study based in five primary care practices in the UK. METHOD: From a sample of patients who were identified as drinking at harmful/hazardous levels, 30 participants were identified by maximum variation sampling for qualitative in-depth interviews. Using the principles of constant comparison the transcribed interviews were thematically analysed. RESULTS: Receiving a postal AUDIT questionnaire was viewed as acceptable by participants. For some completing the AUDIT increased awareness of their hazardous alcohol use and a positive blood test indicating liver fibrosis was a catalyst for behaviour change. For others, a negative blood test result provided a licence to continue drinking at hazardous levels. A limited understanding of safe drinking and of ALD was common. CONCLUSION: Educational and training needs of primary care professionals must be taken into account, so that patients with marker levels indicating low risk of fibrosis are correctly informed about the likely risks of continuing to drink at the same levels.

Country of Publication: England

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

Subject Headings: Adult
 "Alcohol Drinking/ae [Adverse Effects]"
 "*Alcohol Drinking/px [Psychology]"
 Early Diagnosis
 Female
 General Practice
 Humans
 "*Liver Diseases Alcoholic/di [Diagnosis]"
 "Liver Diseases Alcoholic/px [Psychology]"
 Male
 Middle Aged
 "*Patient Acceptance of Health Care/px [Psychology]"
 Patient Education as Topic
 Physician-Patient Relations
 Questionnaires
 Risk Reduction Behavior

Source: MEDLINE

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

17. The pain of pregabalin prescribing in prisons.

Citation: British Journal of General Practice, August 2013, vol./is. 63/613(405), 0960-1643;1478-5242 (2013 Aug)

Author(s): Bicknell M

Language: English

Country of Publication: England

CAS Registry Number: 0 (Analgesics); 55JG375S6M (pregabalin); 56-12-2 (gamma-Aminobutyric Acid)

Publication Type: Letter

Subject Headings: ["*Analgesics/tu \[Therapeutic Use\]"](#)
[General Practice](#)
[Great Britain](#)
[Guideline Adherence](#)
[Humans](#)
["Inappropriate Prescribing/sn \[Statistics and Numerical Data\]"](#)
["Opiate Substitution Treatment/sn \[Statistics and Numerical Data\]"](#)
["Opioid-Related Disorders/rh \[Rehabilitation\]"](#)
["*Pain/pc \[Prevention and Control\]"](#)
[Practice Guidelines as Topic](#)
[*Prisoners](#)
["*gamma-Aminobutyric Acid/aa \[Analogues and Derivatives\]"](#)
["gamma-Aminobutyric Acid/tu \[Therapeutic Use\]"](#)

Source: MEDLINE

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

18. Deaths from "legal highs": a problem of definitions.

Citation: Lancet, March 2014, vol./is. 383/9921(952), 0140-6736;1474-547X (2014 Mar 15)

Author(s): King LA; Nutt DJ; Independent Scientific Committee on Drugs

Institution: Retired, Basingstoke, UK. Electronic address: les@king.myzen.co.uk.; Imperial College, London, UK.

Language: English

Country of Publication: England

CAS Registry Number: 0 (Psychotropic Drugs)

Publication Type: Letter

Subject Headings: ["Great Britain/ep \[Epidemiology\]"](#)
[Humans](#)
["*Psychotropic Drugs/po \[Poisoning\]"](#)
["*Substance-Related Disorders/mo \[Mortality\]"](#)
[*Terminology as Topic](#)

Source: MEDLINE

Full Text: Available from *Lancet* in *Newcomb Library & Information Service*
 Available from *Elsevier ScienceDirect Journals* in *Lancet, The*
 Available from *Elsevier* in *Lancet, The*
 Available from *The Lancet* in *Lancet, The*

19. Ethanol cytotoxic effect on trophoblast cells.

Citation: Toxicology Letters, March 2014, vol./is. 225/2(216-21), 0378-4274;1879-3169 (2014 Mar 3)

Author(s): Clave S; Joya X; Salat-Batlle J; Garcia-Algar O; Vall O

Institution: Unitat de Recerca Infancia i Entorn (URIE), Institut Hospital del Mar d'Investigacions Mediques (IMIM), PRBB, C/ Dr. Aiguader 88, 08003 Barcelona, Spain; Red de Salud Materno Infantil y del Desarrollo (SAMID), Programa RETIC, Instituto Carlos III, C/ Sinesio Delgado 4, 28029 Madrid, Spain.; Unitat de Recerca Infancia i Entorn (URIE), Institut Hospital del Mar d'Investigacions Mediques (IMIM), PRBB, C/ Dr. Aiguader 88, 08003 Barcelona, Spain; Red de Salud Materno Infantil y del Desarrollo (SAMID), Programa RETIC, Instituto Carlos III, C/ Sinesio Delgado 4, 28029 Madrid, Spain.; Unitat de Recerca Infancia i Entorn (URIE), Institut Hospital del Mar d'Investigacions Mediques (IMIM), PRBB, C/ Dr. Aiguader 88, 08003 Barcelona, Spain; Red de Salud Materno Infantil y del Desarrollo (SAMID), Programa RETIC, Instituto Carlos III, C/ Sinesio Delgado 4, 28029 Madrid, Spain.; Unitat de Recerca Infancia i Entorn (URIE), Institut Hospital del Mar d'Investigacions Mediques (IMIM), PRBB, C/ Dr. Aiguader 88, 08003 Barcelona, Spain; Red de Salud Materno Infantil y del Desarrollo (SAMID), Programa RETIC, Instituto Carlos III, C/ Sinesio Delgado 4, 28029 Madrid, Spain.; Departament de Pediatria, Obstetricia i Ginecologia, i Medicina Preventiva, Universitat Autonoma de Barcelona (UAB), Campus M, 08193 Bellaterra, Spain. Electronic address: 90458@hospitaldelmar.cat.; Unitat de Recerca Infancia i Entorn (URIE), Institut Hospital del Mar d'Investigacions Mediques (IMIM), PRBB, C/ Dr. Aiguader 88, 08003 Barcelona, Spain; Red de Salud Materno Infantil y del Desarrollo (SAMID), Programa RETIC, Instituto Carlos III, C/ Sinesio Delgado 4, 28029 Madrid, Spain; Departament de Pediatria, Obstetricia i Ginecologia, i Medicina Preventiva, Universitat Autonoma de Barcelona (UAB), Campus M, 08193 Bellaterra, Spain.

Language: English

Abstract: Prenatal ethanol exposure may cause both, altered fetal neurodevelopment and impaired placental function. These disturbances can lead to growth retardation, which is one of the most prevalent features in Fetal Alcohol Syndrome (FAS). It is not known whether there is a specific pattern of cytotoxicity caused by ethanol that can be extrapolated to other cell types. The aim of this study was to determine the cytotoxic effects caused by sustained exposure of trophoblast cells to ethanol. The cytotoxic effect of sustained exposure to standard doses of ethanol on an in vitro human trophoblast cell line, JEG3, was examined. Viable cell count by exclusion method, total protein concentration, lactate dehydrogenase (LDH) activity and activation of apoptotic markers (P-H2AX, caspase-3 and PARP-1) were determined. Sustained exposure to ethanol decreased viable cell count and total protein concentration. LDH activity did not increased in exposed cells but apoptotic markers were detected. In addition, there was a dose-dependent relationship between ethanol concentration and apoptotic pathways activation. Sustained ethanol exposure causes cellular cytotoxicity by apoptotic pathways induction as a result of DNA damage. This apoptotic induction may partially explain the altered function of placental cells and the damage previously detected in other tissues. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Netherlands

CAS Registry Number: 0 (H2AFX protein, human); 0 (Histones); 3K9958V90M (Ethanol); EC 1-1-1-27 (L-Lactate Dehydrogenase); EC 2-4-2-30 (PARP1 protein, human); EC 2-4-2-30 (Poly(ADP-ribose) Polymerases); EC 3-4-22 (CASP3 protein, human); EC 3-4-22 (Caspase 3)

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

Subject Headings: ["Apoptosis/de \[Drug Effects\]"](#)
["Caspase 3/ge \[Genetics\]"](#)
["Caspase 3/me \[Metabolism\]"](#)
Cell Line
["Cell Survival/de \[Drug Effects\]"](#)
["DNA Damage/de \[Drug Effects\]"](#)
["*Ethanol/to \[Toxicity\]"](#)
Female
["Fetal Alcohol Spectrum Disorders/et \[Etiology\]"](#)
["Fetal Alcohol Spectrum Disorders/pa \[Pathology\]"](#)

"Histones/ge [Genetics]"
 "Histones/me [Metabolism]"
 Humans
 "L-Lactate Dehydrogenase/me [Metabolism]"
 "Maternal-Fetal Exchange/de [Drug Effects]"
 "Poly(ADP-ribose) Polymerases/ge [Genetics]"
 "Poly(ADP-ribose) Polymerases/me [Metabolism]"
 Pregnancy
 Prenatal Exposure Delayed Effects
 "Trophoblasts/cy [Cytology]"
 "*Trophoblasts/de [Drug Effects]"
 "Trophoblasts/me [Metabolism]"

Source: MEDLINE

20. The Edmonton Classification System for Cancer Pain: comparison of pain classification features and pain intensity across diverse palliative care settings in eight countries.

Citation: Journal of Palliative Medicine, May 2013, vol./is. 16/5(516-23), 1557-7740;1557-7740 (2013 May)

Author(s): Nekolaichuk CL; Fainsinger RL; Aass N; Hjermstad MJ; Knudsen AK; Klepstad P; Currow DC; Kaasa S; European Palliative Care Research Collaborative (EPCRC)

Institution: Division of Palliative Care Medicine, University of Alberta, Edmonton, Alberta, Canada. Cheryl.Nekolaichuk@covenanthealth.ca

Language: English

Abstract: BACKGROUND: Standardized approaches for assessing and classifying cancer pain are required to improve treatment of patients with complex pain profiles. The Edmonton Classification System for Cancer Pain (ECS-CP) offers a starting point for the evolution of a standardized international classification system for cancer pain and was introduced into multisite research initiatives of the European Palliative Care Research Collaborative (EPCRC). OBJECTIVES: The primary purpose of this study was to describe the prevalence of the five ECS-CP pain classification features: pain mechanism, incident pain, psychological distress, addictive behavior, and cognition--in a diverse international sample of patients with advanced cancer. METHODS: A total of 1070 adult patients with advanced cancer were recruited from 17 sites in Norway, the United Kingdom, Austria, Germany, Switzerland, Italy, Canada, and Australia; 1051 of 1070 patients were evaluable. A clinician completed the ECS-CP for each enrolled patient. Additional information, including pain intensity, were also collected through patient self-reports, using touch-sensitive computers. RESULTS: Of 1051 evaluable patients, 670 (64%) were assessed by a clinician as having cancer pain: nociceptive pain (n=534; 79.7%); neuropathic pain (n=113; 16.9%); incident pain (n=408; 60.9%); psychological distress (n=212; 31.6%); addictive behavior (n=30; 4.5%); normal cognition (n=616; 91.9%). The prevalence of ECS-CP features and pain intensity scores (11-item scale; 0=none, 10=worst; rated as now) varied substantially across sites and locations of care. CONCLUSION: The ECS-CP is a clinically relevant systematic framework, which is able to detect differences in salient pain classification features across diverse settings and countries. Further validation studies need to be conducted in varied advanced cancer and palliative care settings to advance the development of the ECS-CP toward an internationally recognized pain classification system.

Country of Publication: United States

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

Subject Headings: [Adult](#)
[Aged](#)
[Aged 80 and over](#)
["Behavior Addictive/px \[Psychology\]"](#)
["Cognition Disorders/px \[Psychology\]"](#)
[Female](#)
[Humans](#)

Male
 Middle Aged
 "*Neoplasms/co [Complications]"
 "Neoplasms/px [Psychology]"
 "*Pain/cl [Classification]"
 "Pain/px [Psychology]"
 Pain Measurement
 *Palliative Care

Source: MEDLINE

21. How does rate of smoking cessation vary by age, gender and social grade? Findings from a population survey in England.

Citation: Addiction, September 2013, vol./is. 108/9(1680-5), 0965-2140;1360-0443 (2013 Sep)

Author(s): Fidler J; Ferguson SG; Brown J; Stapleton J; West R

Institution: Department of Epidemiology and Public Health, Cancer Research UK Health Behaviour Research Centre, University College London, London, UK.

Language: English

Abstract: AIMS: To assess the incidence of long-term smoking cessation as a function of age, gender, social grade and their interactions. DESIGN AND SETTING: Cross-sectional surveys of population representative samples of smokers in England. PARTICIPANTS: A total of 24094 ever smokers (>21 and <60 years of age) participating in household surveys between November 2006 and February 2011. MEASUREMENTS: The ratio of long-term (>1 year) ex-smokers to ever-smokers was calculated for each age. Regression analyses were used to model the association between age and quit ratio, with the change in quit ratio by year of age n years versus all years up to n-1 years, yielding an estimate of the quitting incidence at that age. Analyses were conducted for the entire sample and then for the sample stratified by gender and social grade, and interactions assessed between these variables. FINDINGS: A cubic trend was needed to fit the data. The estimated quitting incidence between ages 21 and 30 was 1.5% (95% CI: 1.0%-2.0%), between 31 and 50 it was 0.3% (95% CI: 0.2%-0.5%) and between 51 and 60 it was 1.2% (95% CI: 0.7%-1.7%). Age interacted with gender and social grade: women and smokers from higher social grades had a higher incidence of quitting than men and those from lower social grades specifically in young adulthood. CONCLUSIONS : The incidence of smoking cessation in England appears to be greater in young and old adults compared with those in middle age. Women and higher social grade smokers show a greater incidence of quitting than men and those from lower social grades specifically in young adulthood. 2013 Society for the Study of Addiction.

Country of Publication: England

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

Subject Headings: Adult
 Age Factors
 Cross-Sectional Studies
 England
 Female
 Humans
 Male
 Middle Aged
 Sex Factors
 "*Smoking/ep [Epidemiology]"
 "*Smoking Cessation/sn [Statistics and Numerical Data]"
 Social Class
 Young Adult

Source: MEDLINE

Full Text: Available from *Wiley* in *Addiction*

22. 'Ecstasy' and the use of sleep medications in a general community sample: a 4-year follow-up.

- Citation:** Addiction, September 2013, vol./is. 108/9(1640-8), 0965-2140;1360-0443 (2013 Sep)
- Author(s):** Tait RJ; George A; Olesen S
- Institution:** Centre for Mental Health Research, Australian National University, Canberra, ACT, Australia. robert.tait@curtin.edu.au
- Language:** English
- Abstract:** AIMS: Animal models show that a single dose of 3,4-methylenedioxymethamphetamine (MDMA; 'ecstasy') can result in long-term disruption of sleep. We evaluated the relationship between ecstasy consumption and the use of sleep medications in humans after controlling for key factors. DESIGN: The Personality and Total Health Through Life project uses a longitudinal cohort with follow-up every 4 years. This study reports data from waves 2 and 3. SETTING: Participants were recruited from the electoral roll in the Australian Capital Territory and Queanbeyan, New South Wales, Australia. PARTICIPANTS: Participants were aged 20-24 years at wave 1 (1999-2000). MEASURES: The study collected self-reported data on ecstasy, meth/amphetamine, cannabis, alcohol, tobacco and use of sleeping medications (pharmaceutical or other substances). Depression was categorized using the Brief Patient Health Questionnaire (BPHQ). Other psychosocial measures included life-time traumas. We used generalized estimating equations to model outcomes. FINDINGS: Ecstasy data were available from 2128 people at wave 2 and 1977 at wave 3: sleeping medication use was reported by 227 (10.7%) respondents at wave 2 and 239 (12.1%) at wave 3. Increased odds ratios (OR) for sleeping medication use was found for those with depression [OR=1.88, 95% confidence interval (CI): 1.39, 2.53], women (OR=1.44, 95% CI: 1.13, 1.84), and increased by 19% for each life-time trauma. Ecstasy use was not a significant predictor, but >monthly versus never meth/amphetamine use increased the odds (OR=3.03, 95% CI 1.30, 7.03). CONCLUSION: The use of ecstasy appears to be associated with the use of sleeping medications but this association can be accounted for by other factors. 2013 Society for the Study of Addiction.
- Country of Publication:** England
- CAS Registry Number:** 0 (Hallucinogens); 0 (Hypnotics and Sedatives); KE1SEN21RM (N-Methyl-3,4-methylenedioxyamphetamine)
- Publication Type:** Journal Article; Research Support, Non-U.S. Gov't
- Subject Headings:** [Adult](#)
["*Amphetamine-Related Disorders/co \[Complications\]"](#)
[Australian Capital Territory](#)
[Female](#)
[Follow-Up Studies](#)
["*Hallucinogens/ae \[Adverse Effects\]"](#)
[Humans](#)
["*Hypnotics and Sedatives/tu \[Therapeutic Use\]"](#)
[Male](#)
["*N-Methyl-3 4-methylenedioxyamphetamine/ae \[Adverse Effects\]"](#)
[New South Wales](#)
["*Sleep Disorders/ci \[Chemically Induced\]"](#)
["Sleep Disorders/dt \[Drug Therapy\]"](#)
[Young Adult](#)
- Source:** MEDLINE
- Full Text:** Available from *Wiley* in [Addiction](#)

23. Multiple parameter evidence synthesis--a potential solution for when information on drug use and harm is in conflict.

- Citation:** Addiction, September 2013, vol./is. 108/9(1529-31), 0965-2140;1360-0443 (2013 Sep)
- Author(s):** Hickman M; De Angelis D; Jones H; Harris R; Welton N; Ades AE

Language: English

Abstract: The quality of the evidence on estimating drug-related harm is not yet as advanced as that for intervention effectiveness. Multiple parameter evidence synthesis offers a potential solution, in which 'all available evidence' is combined into a single coherent model. We present a case study of estimating the number of people infected with hepatitis C.

Country of Publication: England

Publication Type: Editorial

Subject Headings: "England/ep [Epidemiology]"
Harm Reduction
"*Hepatitis C Chronic/ep [Epidemiology]"
Humans
*Models Statistical
Prevalence
"Risk Assessment/mt [Methods]"
"*Substance Abuse Intravenous/ep [Epidemiology]"

Source: MEDLINE

Full Text: Available from *Wiley* in *Addiction*