Search Results

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Search History

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3. MEDLINE; 1 OR 2; 200293 results.
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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. Retreatment with varenicline for smoking cessation in smokers who have previously taken varenicline: a randomized, placebo-controlled trial.

Citation: Clinical Pharmacology & Therapeutics, September 2014, vol./is. 96/3(390-6), 0009-9236;1532-6535 (2014 Sep)

Author(s): Gonzales D; Hajek P; Pliamm L; Nackaerts K; Tseng LJ; McRae TD; Treadow J

Institution: OHSU Smoking Cessation Center, Division of Pulmonary and Critical Care Medicine, Department of Medicine, Oregon Health & Science University, Portland, Oregon, USA.; UK Centre for Tobacco and Alcohol Studies, Wolfson Institute of Preventive Medicine, Queen Mary University of London, London, UK.; Department of Family Medicine, University of Toronto, Toronto, Canada.; Respiratory Oncology Unit, Department of Pulmonology, University Hospital Gasthuisberg, Leuven, Belgium.; Pfizer, New York, New York, USA.; Pfizer, New York, New York, USA.; Pfizer, New York, New York, USA.

Language: English

Abstract: The efficacy and safety of retreatment with varenicline in smokers attempting to quit were evaluated in this randomized, double-blind, placebo-controlled, multicenter trial (Australia, Belgium, Canada, the Czech Republic, France, Germany, the United Kingdom, and the United States). Participants were generally healthy adult smokers (> 10 cigarettes/day) with > 1 prior quit attempt (> 2 weeks) using varenicline and no quit attempts in < 3 months; they were randomly assigned (1:1) to 12 weeks' varenicline (n = 251) or placebo (n = 247) treatment, with individual counseling, plus 40 weeks' nontreatment follow-up. The primary efficacy end point was the carbon monoxide-confirmed (< 10 ppm) continuous abstinence rate for weeks 9-12, which was 45.0% (varenicline; n = 249) vs. 11.8% (placebo; n = 245; odds ratio: 7.08; 95% confidence interval: 4.34, 11.55; P < 0.0001). Common varenicline group adverse events were nausea, abnormal dreams, and headache, with no reported suicidal behavior. Varenicline is efficacious and well tolerated in smokers who have previously taken it. Abstinence rates are comparable with rates reported for varenicline-naive smokers.

Country of Publication: United States

CAS Registry Number: 0 (Benzazepines); 0 (Nicotinic Agonists); 0 (Quinoxalines); W6HS99O8ZO (varenicline)

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

Subject Headings:
Adult
Aged
Australia
"*Benzazepines/ad [Administration and Dosage]"
"Benzazepines/ae [Adverse Effects]"
Canada
Chi-Square Distribution
Counseling
Double-Blind Method
Europe
Female
Humans
Male
Middle Aged
"*Nicotinic Agonists/ad [Administration and Dosage]"
"Nicotinic Agonists/ae [Adverse Effects]"
Odds Ratio
"*Quinoxalines/ad [Administration and Dosage]"
"Quinoxalines/ae [Adverse Effects]"
Recurrence
Retreatment
"Smoking/ae [Adverse Effects]"
"*Smoking/pc [Prevention and Control]"

"*Smoking Cessation/mt [Methods]"
Time Factors
"*Tobacco Use Disorder/dt [Drug Therapy]"
Treatment Outcome
United States
Young Adult

Source: MEDLINE

2. Traumatic basal subarachnoid hemorrhage suspected to have been caused by contrecoup cerebellar contusions: a case report.

Citation: Legal Medicine, March 2014, vol./is. 16/2(92-4), 1344-6223;1873-4162 (2014 Mar)

Author(s): Sato T; Tsuboi K; Nomura M; Iwata M; Abe S; Tamura A; Tsuchihashi H; Nishio H; Suzuki K

Institution: Department of Legal Medicine, Osaka Medical College, Takatsuki, Japan. Electronic address: leg017@art.osaka-med.ac.jp.; Department of Legal Medicine, Osaka Medical College, Takatsuki, Japan.; Department of Legal Medicine, Osaka Medical College, Takatsuki, Japan.; Department of Legal Medicine, Osaka Medical College, Takatsuki, Japan.; Department of Legal Medicine, Osaka Medical College, Takatsuki, Japan.; Department of Legal Medicine, Osaka Medical College, Takatsuki, Japan.; Department of Legal Medicine, Hyogo College of Medicine, Nishinomiya, Japan.; Department of Legal Medicine, Osaka Medical College, Takatsuki, Japan.

Language: English

Abstract: Traumatic cerebellar hemorrhagic contusions are infrequent, and the pathogenic mechanism involves a coup injury that is associated with motor vehicle accidents in most cases. Traumatic basal subarachnoid hemorrhage (TBSAH) is commonly reported after blunt trauma to the neck or unrestricted movement of the head, and the source of the hemorrhage is most frequently identified in the vertebrobasilar arteries. A 55-year-old woman who was addicted to alcohol was found dead in her bed. She had a bruise on the left side of her posterior parietal region, and autopsy revealed massive subarachnoid hemorrhage at the base of the brain; the hematoma was strongly attached to the right lower surface of the cerebellar hemisphere. No ruptured cerebral aneurysms, arteriovenous malformations or vertebrobasilar artery leakage were detected. Hemorrhagic cerebellar contusions were regarded as the source of the TBSAH. This is the first report of TBSAH suspected to have been caused by contrecoup cerebellar contusions.

Country of Publication: Ireland

Publication Type: Case Reports; Journal Article

Subject Headings: *Accidental Falls
"Alcoholism/co [Complications]"
"*Cerebellum/in [Injuries]"
"Cerebellum/pa [Pathology]"
"*Craniocerebral Trauma/co [Complications]"
"Craniocerebral Trauma/pa [Pathology]"
Female
Humans
"Intracranial Hemorrhage Traumatic/pa [Pathology]"
Middle Aged
"*Subarachnoid Hemorrhage Traumatic/et [Etiology]"
"*Subarachnoid Hemorrhage Traumatic/pa [Pathology]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Legal Medicine*

3. Doctor who stalked glamour model is reinstated.

Citation: BMJ, 2014, vol./is. 349/(g5414), 0959-535X;1756-1833 (2014)

Author(s): Dyer C

Institution: The BMJ.

Language: English

Country of Publication: England

Publication Type: News

Subject Headings:
"*Alcoholism/rh [Rehabilitation]"
"Domestic Violence/lj [Legislation and Jurisprudence]"
"*Employee Discipline/lj [Legislation and Jurisprudence]"
Great Britain
Humans
"*Medical Staff/lj [Legislation and Jurisprudence]"
"*Physician Impairment/lj [Legislation and Jurisprudence]"
*Stalking

Source: MEDLINE

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

4. Dissemination of a computer-based psychological treatment in a drug and alcohol clinical service: an observational study.

Citation: Addiction Science & Clinical Practice, 2014, vol./is. 9/(15), 1940-0632;1940-0640 (2014)

Author(s): Kay-Lambkin FJ; Simpson AL; Bowman J; Childs S

Institution: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia. f.kaylambkin@unsw.edu.au.

Language: English

Abstract: BACKGROUND: There is emerging evidence for the potential of computer-based psychological treatments (CBPT) as an add-on to usual clinical practice in the management of health problems.OBJECTIVE: The study set out to observe if, when, and how clinicians working in a publically funded alcohol/other drug (AOD) clinical service might utilize SHADE (Self-Help for Alcohol and other drug use and DEpression), a CBPT program for comorbid depression and alcohol or cannabis use, in their clinical practice.METHODS: Thirteen clinicians working within an AOD service on the Central Coast of New South Wales, Australia, were recruited. At baseline, all 13 clinicians were assessed for their computer anxiety and openness to innovation. Clinicians referred current clients to the study, with consenting and eligible clients (N=35) completing a baseline and 15-week follow-up clinical assessment. The assessment comprised a range of mental health and AOD measures administered by an independent research assistant. Over the course of the study, clinicians submitted session checklists detailing information about session content, including the context and extent to which SHADE was used for each client.RESULTS: Descriptive statistics showed that clinicians employed the SHADE program in a variety of ways. When SHADE modules were used, they were generally introduced in the early phase of treatment, on average, around session 4 (M=3.77, SD=5.26, range 1-36). However, only 12 of the 35 clients whose session checklists were available were exposed to the SHADE modules; this, despite 28/35 clients indicating that they would be willing to use CBPT during their current treatment program.CONCLUSIONS: Treatment seekers in the AOD service of the current trial were generally open to receiving CBPT like SHADE; however, clinicians tended to use SHADE with only 34 percent of clients. This indicates the importance of providing ongoing support and encouragement to clinicians, in addition to an initial training session, to encourage the adoption of innovative technologies into clinical practice, and perhaps to engage clients in a discussion about CBPT more routinely.TRIAL REGISTRATION: Australian Clinical Trial Registration Number ACTRN12611000382976.

Country of Publication: England

CAS Registry Number: 0 (Street Drugs)

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

Subject Headings:
Adult
"Alcoholism/di [Diagnosis]"
"Alcoholism/px [Psychology]"
"*Alcoholism/rh [Rehabilitation]"
Attitude of Health Personnel
Checklist
Combined Modality Therapy
Comorbidity
"Depressive Disorder/di [Diagnosis]"
"Depressive Disorder/px [Psychology]"
"Depressive Disorder/rh [Rehabilitation]"
Diffusion of Innovation
Female
Humans
*Information Dissemination
Inservice Training
Male
"Marijuana Abuse/di [Diagnosis]"
"Marijuana Abuse/px [Psychology]"
"Marijuana Abuse/rh [Rehabilitation]"
Middle Aged
New South Wales
Patient Satisfaction
Questionnaires
Randomized Controlled Trials as Topic
"Self Care/px [Psychology]"
Software
*Street Drugs
"Substance-Related Disorders/di [Diagnosis]"
"Substance-Related Disorders/px [Psychology]"
"*Substance-Related Disorders/rh [Rehabilitation]"
*Therapy Computer-Assisted

Source: MEDLINE

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in *Addiction Science & Clinical Practice*; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.
Available from *BioMedCentral* in *Addiction Science and Clinical Practice*
Available from *National Library of Medicine* in *Addiction Science and Clinical Practice*

5. Nine scoring models for short-term mortality in alcoholic hepatitis: cross-validation in a biopsy-proven cohort.

Citation: Alimentary Pharmacology & Therapeutics, April 2014, vol./is. 39/7(721-32), 0269-2813;1365-2036 (2014 Apr)

Author(s): Papastergiou V; Tsochatzis EA; Pieri G; Thalassinos E; Dhar A; Bruno S; Karatapanis S; Luong TV; O'Beirne J; Patch D; Thorburn D; Burroughs AK

Language: English

Abstract: BACKGROUND: Several prognostic models have emerged in alcoholic hepatitis (AH), but lack of external validation precludes their universal use.AIM: To validate the Maddrey Discriminant Function (DF); Glasgow Alcoholic Hepatitis Score (GAHS); Mayo End-stage Liver Disease (MELD); Age, Bilirubin, INR, Creatinine (ABIC); MELD-Na, UK End-stage Liver Disease (UKELD), and three scores of corticosteroid response at 1 week: an Early Change in Bilirubin Levels (ECBL), a 25% fall in bilirubin, and the Lille score.METHODS: Seventy-one consecutive patients with biopsy-proven AH, admitted between November 2007-September 2011, were evaluated. The clinical and

biochemical parameters were analysed to assess prognostic models with respect to 30- and 90-day mortality.RESULTS: There were no significant differences in the areas under the receiver operating characteristics curve (AUROCs) relative to 30-day/90-day mortality: MELD 0.79/0.84, DF 0.71/0.74, GAHS 0.75/0.78, ABIC 0.71/0.78, MELD-Na 0.68/0.76, UKELD 0.56/0.68. One-week rescoring yielded a trend towards improved predictive accuracies (30-day/90-day AUROCs: 0.69-0.84/0.77-0.86). In patients with admission DF > 32 (n = 31), response to corticosteroids according to ECBL, 25% fall in bilirubin and the Lille model yielded AUROCs of 0.73/0.73, 0.78/0.72 and 0.81/0.82 for a 30-day/90-day outcome respectively. All models showed excellent negative predictive values (NPVs; range: 86-100%), while the positive ones were low (range: 17-50%).CONCLUSIONS: MELD, DF, GAHS, ABIC and scores of corticosteroid response proved to be valid in an independent cohort of biopsy-proven alcoholic hepatitis. MELD modifications incorporating sodium did not confer any prognostic advantage over classical MELD. Based on excellent NPVs, the models are best to identify patients at low risk of death.

Country of Publication: England

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

Subject Headings:
Adult
Aged
Biopsy
Cohort Studies
Female
"*Hepatitis Alcoholic/di [Diagnosis]"
"Hepatitis Alcoholic/dt [Drug Therapy]"
"*Hepatitis Alcoholic/mo [Mortality]"
Humans
"Liver/pa [Pathology]"
Male
Middle Aged
*Models Biological
Prognosis
ROC Curve
*Severity of Illness Index

Source: MEDLINE

Full Text: Available from *Wiley* in *Alimentary Pharmacology and Therapeutics*

6. 'Being sick a lot, often on each other': students' alcohol-related provocation.

Citation: Medical Education, March 2014, vol./is. 48/3(268-79), 0308-0110;1365-2923 (2014 Mar)

Author(s): Black LF; Monrouxe LV

Institution: Institute of Medical Education, School of Medicine, Cardiff University, Cardiff, UK.

Language: English

Abstract: CONTEXT: Many medical students consume alcohol in excess, which can compromise their professionalism and increase their risk of future alcohol dependency. Just one study in Japan has examined the social influences of alcohol consumption among medical students. Eighty-six per cent (n = 821) of their respondents reported experiencing some form of alcohol-related harassment since the beginning of medical school. No similar research has been conducted in the UK.METHODS: A cross-sectional online questionnaire of medical students at three British medical schools. In total, 216 students answered questions regarding their experiences of alcohol-related provocation (as targets and instigators), the rate of occurrence of events and their distress following acts of provocation. An open-ended question enabled respondents to report personal experiences of alcohol-related provocation.RESULTS: Seventy-five per cent (n = 162) of respondents reported experiencing alcohol-related provocation during the past year, with 49.1% (n = 106) reporting instigating acts of provocation. The most prevalent experience (both for targets and instigators) was coercion to drink an entire alcoholic beverage at once as part of a game. Most acts of alcohol-related provocation generated little or no distress. Males

were significantly more likely to experience some events than females. Thirty-two personal narratives of alcohol-related provocation were reported (only three reported resisting provocation). Thematic analysis identified three themes with differing power relations: ongoing 'peer-peer provocation' as a commonplace social activity, hierarchical 'peer provocation' at initiation ceremonies and 'team-mate provocation' at sports socials as bonding exercises. The tone of the narratives depended on the context in which the events described occurred.CONCLUSIONS: Alcohol-related provocation occurs among some UK medical students and may present professionalism issues to medical students. Medical schools may wish to integrate more teaching regarding behaviour around alcohol into their curricula by addressing students' explicit and implicit attitudes towards alcohol consumption. 2014 John Wiley & Sons Ltd.

Country of Publication: England

Publication Type: Journal Article

Subject Headings:
Adolescent
Adult
"Alcohol Drinking/ae [Adverse Effects]"
"*Alcohol Drinking/ep [Epidemiology]"
"Alcohol Drinking/px [Psychology]"
"Binge Drinking/co [Complications]"
"*Binge Drinking/ep [Epidemiology]"
"Binge Drinking/px [Psychology]"
*Coercion
Cross-Sectional Studies
Curriculum
Female
"Great Britain/ep [Epidemiology]"
*Health Knowledge Attitudes Practice
Humans
Male
Peer Group
Qualitative Research
Questionnaires
"*Schools Medical/sn [Statistics and Numerical Data]"
"Students Medical/px [Psychology]"
"*Students Medical/sn [Statistics and Numerical Data]"
"Vomiting/ci [Chemically Induced]"
"Vomiting/ep [Epidemiology]"
Young Adult

Source: MEDLINE

Full Text: Available from *Wiley* in *Medical Education*

7. Methoxetamine toxicity reported to the National Poisons Information Service: clinical characteristics and patterns of enquiries (including the period of the introduction of the UK's first Temporary Class Drug Order).

Citation: Emergency Medicine Journal, January 2014, vol./is. 31/1(45-7), 1472-0205;1472-0213 (2014 Jan)

Author(s): Hill SL; Harbon SC; Coulson J; Cooper GA; Jackson G; Lupton DJ; Vale JA; Thomas SH

Institution: National Poisons Information Service, Newcastle, UK.

Language: English

Abstract: OBJECTIVE: To report the demographic and clinical characteristics of cases of methoxetamine toxicity reported to The National Poisons Information Service (NPIS) by healthcare professionals. To assess the pattern of enquiries from health professionals to the UK NPIS related to methoxetamine, including the period of the making of the UK first Temporary Class Drug Order (TCDO).METHODS: All telephone enquiries to and user sessions for TOXBASE, the NPIS on-line information resource, related to methoxetamine (and synonyms 'MXE', 'mket' and '2-(3-methoxyphenyl)-2-(ethylamino)cyclohexanone') were reviewed from 1 April 2010

to 1 August 2012. Data were compared for the 3 months before and after the TCDO.RESULTS: There were 47 telephone enquiries and 298 TOXBASE sessions regarding methoxetamine during the period of study. Comparing the 3 months before and after the TCDO, TOXBASE sessions for methoxetamine fell by 79% (from 151 to 32) and telephone enquiries by 80% (from 15 to 3). Clinical features reported by enquirers were consistent with case reports of analytically confirmed methoxetamine toxicity and typical toxidromes were of stimulant (36%), reduced consciousness (17%), dissociative (11%) and cerebellar (6.4%) types, but also particularly featured acute disturbances in mental heath (43%).CONCLUSIONS: Structured NPIS data may reveal trends in drugs of abuse use and toxicity when interpreted within their limitations. Since April 2012, there have been fewer enquiries to NPIS from clinicians, indicating reduced presentations with suspected methoxetamine toxicity to healthcare services. It is unclear if this is related to the TCDO made on 5 April 2012.

Country of Publication: England

CAS Registry Number: 0 (2-(3-methoxyphenyl)-2-(ethylamino)cyclohexanone); 0 (Cyclohexanones); 0 (Cyclohexylamines)

Publication Type: Journal Article

Subject Headings:
"Cyclohexanones/cl [Classification]"
"*Cyclohexanones/to [Toxicity]"
"Cyclohexylamines/cl [Classification]"
"*Cyclohexylamines/to [Toxicity]"
Databases Factual
Drug Information Services
Great Britain
"Substance-Related Disorders/ep [Epidemiology]"
Telephone

Source: MEDLINE

Full Text: Available from *Highwire Press* in *Emergency Medicine Journal*

8. Teens' smoking, drinking, and drug taking at decade low in England.

Citation: BMJ, 2014, vol./is. 349/(g4828), 0959-535X;1756-1833 (2014)

Author(s): Mooney H

Institution: London.

Language: English

Country of Publication: England

Publication Type: News

Subject Headings:
Adolescent
"Alcohol Drinking/ep [Epidemiology]"
Child
"England/ep [Epidemiology]"
Humans
Prevalence
"*Smoking/ep [Epidemiology]"
"*Substance-Related Disorders/ep [Epidemiology]"

Source: MEDLINE

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

9. An altered neural response to reward may contribute to alcohol problems among late adolescents with an evening chronotype.

Citation: Psychiatry Research, December 2013, vol./is. 214/3(357-64), 0165-1781;1872-7123 (2013 Dec 30)

Author(s): Hasler BP; Sitnick SL; Shaw DS; Forbes EE

Institution: Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, PA, USA. Electronic address: haslerbp@upmc.edu.

Language: English

Abstract: Evening chronotypes not only differ from morning-types in their sleep and circadian timing, but they are prone to problematic outcomes involving reward function, including affective disturbance, sensation seeking, and substance involvement. We explored the neural mechanisms underlying these chronotype differences by comparing the neural response to reward in morning- and evening-types. Using a monetary reward fMRI paradigm, we compared the neural response to reward in 13 morning-types and 21 evening-types (all 20 y/o males). Region-of-interest (ROI) analyses focused on the medial prefrontal cortex (mPFC) and ventral striatum (VS), comparing the chronotype groups in these ROIs during anticipation and outcome conditions, and adjusting for time of scan. Chronotype groups were also compared on measures of sensation-seeking, substance involvement, and sleep quality. Evening-types reported significantly greater levels of alcohol dependence and worse sleep quality. Furthermore, evening-types showed an altered neural response to reward relative to morning-types, specifically, reduced mPFC reactivity during reward anticipation and increased VS reactivity during win outcome. In turn, less activation in the mPFC region in response to reward was associated with greater alcohol consumption, while increased activation in the VS in response to reward was associated with more symptoms of alcohol dependence. Increased reward-related problems among evening-types may be accompanied by altered neural responses to reward.

Country of Publication: Ireland

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

Subject Headings:
"*Activity Cycles/ph [Physiology]"
"Alcohol Drinking/pa [Pathology]"
"Alcohol Drinking/pp [Physiopathology]"
"Alcohol Drinking/px [Psychology]"
"*Alcohol-Related Disorders/pa [Pathology]"
"*Alcohol-Related Disorders/pp [Physiopathology]"
"Alcohol-Related Disorders/px [Psychology]"
Anticipation Psychological
Brain Mapping
"Corpus Striatum/pa [Pathology]"
"Corpus Striatum/pp [Physiopathology]"
Female
Humans
Magnetic Resonance Imaging
Male
"Motivation/ph [Physiology]"
"Prefrontal Cortex/pa [Pathology]"
"Prefrontal Cortex/pp [Physiopathology]"
*Reward
"Sleep/ph [Physiology]"
Time Factors
Young Adult

Source: MEDLINE

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

10. The efficiency of functional brain networks does not differ between smokers and non-smokers.

Citation: Psychiatry Research, December 2013, vol./is. 214/3(349-56), 0165-1781;1872-7123 (2013 Dec 30)

Author(s): Breckel TP; Thiel CM; Giessing C

Institution: Biological Psychology Lab, Department of Psychology, Carl von Ossietzky University, Oldenburg, Germany. Electronic address: Thomas.breckel@uni-oldenburg.de.

Language: English

Abstract: Acute nicotine consumption in smokers impacts on functional brain network topology indicating an increase in the efficiency of information transfer and attentional task performance. The effects of chronic nicotine consumption on functional brain network topology are unknown. We here investigated the effects of chronic smoking-behaviour on functional brain network topology. Minimally-deprived smokers (N=18) and non-smokers (N=17) were measured within an fMRI scanner during a resting state condition. Graph-theoretical metrics of functional network integration (global efficiency and clustering) that have been shown to be affected by acute nicotine administration were compared between both groups. Our results revealed that smoking status did not significantly change functional network integration. Additional tests for non-inferiority confirmed the similarity of regional or nodal network properties. Brain regions such as the left insular and middle frontal gyrus, in which acute nicotine consumption affected network topology, did not reveal any decrease in functional network efficiency following chronic nicotine consumption. Within the limitation of the investigated sample size, our data suggest that the integration of functional brain networks is not altered in minimally-deprived smokers. Our findings are of relevance for clinical studies showing changes in network topology between psychiatric patients with high prevalence of smoking and healthy control subjects.

Country of Publication: Ireland

CAS Registry Number: 54-11-5 (Nicotine)

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

Subject Headings:
Adult
"Attention/de [Drug Effects]"
"Attention/ph [Physiology]"
"*Brain/de [Drug Effects]"
"*Brain/ph [Physiology]"
Brain Mapping
Case-Control Studies
"Cerebral Cortex/de [Drug Effects]"
"Cerebral Cortex/ph [Physiology]"
Female
Humans
Magnetic Resonance Imaging
Male
"Nicotine/ad [Administration and Dosage]"
"*Nicotine/pd [Pharmacology]"
"Rest/ph [Physiology]"
Sample Size
"Smoking/pp [Physiopathology]"
*Smoking
Tobacco Use Disorder
Young Adult

Source: MEDLINE

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

11. The brain effects of cannabis in healthy adolescents and in adolescents with schizophrenia: a systematic review.

Citation: Psychiatry Research, December 2013, vol./is. 214/3(181-9), 0165-1781;1872-7123 (2013 Dec 30)

Author(s): James A; James C; Thwaites T

Institution: Highfield Unit, Warneford Hospital, Oxford OX3 7JX. UK. Electronic address: anthony.james@psych.ox.ac.uk.

Language: English

Abstract: Cannabis is widely used in adolescence; however, the effects of cannabis on the developing brain remain unclear. Cannabis might be expected to have increased effects upon brain development and cognition during adolescence. There is extensive re-organisation of grey (GM) and white matter (WM) at this time, while the endocannabinoid (eCB) system, which is involved in the normal physiological regulation of neural transmission, is still developing. In healthy adolescent cannabis users there is a suggestion of greater memory loss and hippocampal volume changes. Functional studies point to recruitment of greater brain areas under cognitive load. Structural and DTI studies are few, and limited by comorbid drug and alcohol use. The studies of cannabis use in adolescent-onset schizophrenia (AOS) differ, with one study pointing to extensive GM and WM changes. There is an intriguing suggestion that the left parietal lobe may be more vulnerable to the effects of cannabis in AOS. As in adult schizophrenia cognition does not appear to be adversely affected in AOS following cannabis use. Given the limited number of studies it is not possible to draw firm conclusions. There is a need for adequately powered, longitudinal studies.

Country of Publication: Ireland

CAS Registry Number: 7J8897W37S (Dronabinol)

Publication Type: Journal Article; Meta-Analysis; Review

Subject Headings:
Adolescent
"*Brain/de [Drug Effects]"
"*Brain/pp [Physiopathology]"
"Cannabis/ae [Adverse Effects]"
"Cannabis/ch [Chemistry]"
*Cannabis
"Cognition/de [Drug Effects]"
"Dronabinol/ae [Adverse Effects]"
"Dronabinol/pd [Pharmacology]"
*Health
Humans
"*Marijuana Abuse/pp [Physiopathology]"
"Nerve Fibers Myelinated/de [Drug Effects]"
"Nerve Fibers Unmyelinated/de [Drug Effects]"
Neuropsychological Tests
"Parietal Lobe/de [Drug Effects]"
"Parietal Lobe/pp [Physiopathology]"
Psychometrics
"*Schizophrenia/pp [Physiopathology]"
Sex Characteristics

Source: MEDLINE

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

12. White matter characterization of adolescent binge drinking with and without co-occurring marijuana use: a 3-year investigation.

Citation: Psychiatry Research, December 2013, vol./is. 214/3(374-81), 0165-1781;1872-7123 (2013 Dec 30)

Author(s): Jacobus J; Squeglia LM; Bava S; Tapert SF

Institution: University of California, San Diego, Department of Psychiatry, VA San Diego Healthcare System, 3350 La Jolla Village Drive (MC 151B), San Diego, CA 92161, United States.

Language: English

Abstract: The aims of this study were to investigate the consequences of prolonged patterns of alcohol and marijuana use on white matter integrity and neurocognitive functioning in late adolescence, and examine neurodevelopmental trajectories over three years of regular

follow-up visits. Three groups of demographically similar teens received assessments every 1.5 years (controls with consistently minimal substance use, n=16; teens who gradually increase their heavy episodic drinking n=17, and continuous binge drinkers with heavy marijuana use, n=21), including comprehensive neuropsychological evaluations, diffusion tensor imaging, and detailed substance use interviews. One-way ANOVA identified fifteen white matter clusters that significantly differed between groups at 3-year follow-up, ages 19-22; controls consistently demonstrated higher values of tissue integrity across fiber tracts. Repeated measures ANOVA revealed significant declines in white matter integrity from baseline to 3-year follow-up in the subsample of substance users, along with poorer global neurocognitive performance in alcohol users with heavy marijuana use by the 18-month follow-up. Findings suggest healthier brain white matter microstructure and better neurocognitive performance for teens free from heavy alcohol and marijuana use. Long-term engagement in these substances may adversely influence white matter and increase vulnerability for development of neuropathology purported to underlie future risk-taking and addictive behaviors.

Country of Publication: Ireland

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

Subject Headings:
Adolescent
"*Binge Drinking/co [Complications]"
"*Binge Drinking/pa [Pathology]"
"Binge Drinking/px [Psychology]"
"Brain/pa [Pathology]"
"Brain/pp [Physiopathology]"
Cognition
Diffusion Tensor Imaging
Female
Humans
Male
"*Marijuana Smoking/pa [Pathology]"
"Marijuana Smoking/px [Psychology]"
"*Nerve Fibers Myelinated/pa [Pathology]"
Neuropsychological Tests
Young Adult

Source: MEDLINE

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

13. AMPA receptors in post-mortem brains of Cloninger type 1 and 2 alcoholics: a whole-hemisphere autoradiography study.

Citation: Psychiatry Research, December 2013, vol./is. 214/3(429-34), 0165-1781;1872-7123 (2013 Dec 30)

Author(s): Karkkainen O; Kupila J; Hakkinen M; Laukkanen V; Tupala E; Kautiainen H; Tiihonen J; Storvik M

Institution: Pharmacology and Toxicology, Faculty of Health Sciences, University of Eastern Finland, PO Box 1627, FI-70211 Kuopio, Finland; Department of Forensic Psychiatry, Niuvanniemi Hospital, University of Eastern Finland, PO Box 1627, FI-70211 Kuopio, Finland.

Language: English

Abstract: Dysfunction of the brain glutamate system has been associated with alcoholism. Ionotropic glutamatergic alpha-amino-3-hydroxy-5-methylisoxazole-4-propionic acid receptors (AMPARs) play an important role in both neurotransmission and post-synaptic plasticity. Alterations in AMPAR densities may also play a role in the neurobiological changes associated with alcoholism. In the present study, [(3)H] AMPA binding density was evaluated in the nucleus accumbens (NAc), frontal cortex, anterior cingulate cortex (ACC), dentate gyrus and hippocampus of Cloninger type 1 (n=9) and 2 (n=8) alcoholics, and compared with non-alcoholic control subjects (n=10) by post-mortem

whole-hemisphere autoradiography. The [(3)H] AMPA binding density was significantly higher in the ACC of early onset type 2 alcoholics when compared with controls (p=0.011). There was also a significant negative correlation between [(3)H] AMPA binding and previously published results of dopamine transporter (DAT) density in the ACC in these same brain samples (R=-0.95, p=0.001). Although preliminary, and from a relatively small diagnostic group, the present results help to further explain the pathology of alcohol dependence and impulsive behaviour in type 2 alcoholics.

Country of Publication: Ireland

CAS Registry Number: 0 (Dopamine Plasma Membrane Transport Proteins); 0 (Receptors, AMPA)

Publication Type: Journal Article

Subject Headings:
Adult
Age of Onset
Aged
"*Alcoholism/cl [Classification]"
"*Alcoholism/me [Metabolism]"
Autopsy
Autoradiography
"*Brain/me [Metabolism]"
Case-Control Studies
"Dopamine Plasma Membrane Transport Proteins/me [Metabolism]"
Female
Humans
Male
Middle Aged
"*Receptors AMPA/me [Metabolism]"

Source: MEDLINE

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

14. Abnormal white matter integrity and decision-making deficits in alcohol dependence.

Citation: Psychiatry Research, December 2013, vol./is. 214/3(382-8), 0165-1781;1872-7123 (2013 Dec 30)

Author(s): Zorlu N; Gelal F; Kuserli A; Cenik E; Durmaz E; Saricicek A; Gulseren S

Institution: Izmir Katip Celebi University Ataturk Training and Research Hospital, Department of Psychiatry, Izmir, Turkey. Electronic address: zorlunabi@hotmail.com.

Language: English

Abstract: To date, there is no study that explored the correlation of microstructural changes in the whole brain white matter (WM) and decision-making in alcohol dependent patients (ADP). In the present study, we applied Tract Based Spatial Statistics (TBSS) to study WM changes in ADP compared with healthy controls. We also tested whether there was any relationship between WM integrity and decision-making in ADP. The study included 17 inpatient ADP who had been abstinent for at least 2 weeks before testing and scanning and 16 healthy control subjects. The Iowa Gambling Task (IGT) was used to measure decision-making. Results for the IGT showed a significant group (ADP vs. control) by block interaction. Follow-up univariate analyses of variance showed that the groups were significantly different in the last 20 trails. Four significant clusters were found in which fractional anisotropy was significantly lower in ADP than in control subjects, including the corpus callosum and parietal, occipital and frontal regions. We found significant correlations between impaired IGT performance in the last 20 trials and WM integrity in these regions. Together, these results might help to explain observed decision making deficits in ADP.

Country of Publication: Ireland

Publication Type: Journal Article

Subject Headings: Adolescent

"*Alcoholism/pa [Pathology]"
"*Alcoholism/pp [Physiopathology]"
"Alcoholism/px [Psychology]"
Anisotropy
"Brain/pa [Pathology]"
"Brain/pp [Physiopathology]"
Brain Mapping
Case-Control Studies
*Decision Making
Diffusion Tensor Imaging
Gambling
Humans
Male
Middle Aged
"*Nerve Fibers Myelinated/pa [Pathology]"

Source: MEDLINE

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

15. Novel psychoactive substances: risks and harms.

Citation: Community Practitioner, August 2014, vol./is. 87/8(45-7), 1462-2815;1462-2815 (2014 Aug)

Author(s): O'Neill C

Language: English

Country of Publication: England

CAS Registry Number: 0 (Nonprescription Drugs); 0 (Phytochemicals); 0 (Plant Preparations); 0 (Psychotropic Drugs)

Publication Type: Journal Article

Subject Headings:
Adolescent
Adult
Female
"Great Britain/ep [Epidemiology]"
Humans
Incidence
Male
"*Nonprescription Drugs/ae [Adverse Effects]"
"*Phytochemicals/ae [Adverse Effects]"
"*Plant Preparations/ae [Adverse Effects]"
"*Psychotropic Drugs/ae [Adverse Effects]"
Risk Factors
"*Substance-Related Disorders/ep [Epidemiology]"
"*Substance-Related Disorders/et [Etiology]"
Young Adult

Source: MEDLINE

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

16. Alcohol problems among migrants in substance use treatment: the role of drinking patterns in countries of birth.

Citation: Australian Journal of Primary Health, 2014, vol./is. 20/3(220-1), 1448-7527;1448-7527 (2014)

Author(s): Savic M; Barker SF; Best D; Lubman DI

Institution: Turning Point, Eastern Health, 54-62 Gertrude Street, Fitzroy, Vic. 3065, Australia.; Turning Point, Eastern Health, 54-62 Gertrude Street, Fitzroy, Vic. 3065, Australia.;

Turning Point, Eastern Health, 54-62 Gertrude Street, Fitzroy, Vic. 3065, Australia.; Turning Point, Eastern Health, 54-62 Gertrude Street, Fitzroy, Vic. 3065, Australia.

Language: English

Abstract: Migrants' beliefs about when to seek help for alcohol problems may differ from host-country norms. We undertook an audit of 393 cases of screening in specialist alcohol and other drug services in Victoria, Australia, to examine whether alcohol problem severity at the time of help-seeking was influenced by drinking norms in countries of birth. Alcohol problem severity was measured using the Alcohol Use Disorders Identification Test, and World Health Organization per capita alcohol consumption data was used to form three categories of clients relative to Australian consumption: (1) Australian born; (2) born in low alcohol consumption countries; and (3) born in high alcohol consumption countries. Clients born in high consumption countries such as those in Europe and the UK had significantly higher levels of alcohol problem severity at intake compared with Australian-born clients and clients born in low consumption countries. This suggests that clients from high consumption countries might have delayed seeking help in line with the alcohol norms in their country of origin. Screening this group for alcohol problems in primary health care might avoid significant cumulative harm.

Country of Publication: Australia

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

Subject Headings:
"*Alcoholism/di [Diagnosis]"
"*Alcoholism/ep [Epidemiology]"
"Alcoholism/px [Psychology]"
*Attitude to Health
"Europe/eh [Ethnology]"
Female
"Great Britain/eh [Ethnology]"
Humans
Male
"*Patient Acceptance of Health Care/sn [Statistics and Numerical Data]"
Severity of Illness Index
"Substance-Related Disorders/ep [Epidemiology]"
"Substance-Related Disorders/px [Psychology]"
"Substance-Related Disorders/th [Therapy]"
"Transients and Migrants/px [Psychology]"
"*Transients and Migrants/sn [Statistics and Numerical Data]"
"Victoria/ep [Epidemiology]"

Source: MEDLINE

17. Using autopsy brain tissue to study alcohol-related brain damage in the genomic age.

Citation: Alcoholism: Clinical & Experimental Research, January 2014, vol./is. 38/1(1-8), 0145-6008;1530-0277 (2014 Jan)

Author(s): Sutherland GT; Sheedy D; Kril JJ

Institution: Discipline of Pathology, Sydney Medical School, The University of Sydney, Sydney, NSW, Australia.

Language: English

Abstract: The New South Wales Tissue Resource Centre at the University of Sydney, Australia, is one of the few human brain banks dedicated to the study of the effects of chronic alcoholism. The bank was affiliated in 1994 as a member of the National Network of Brain Banks and also focuses on schizophrenia and healthy control tissue. Alcohol abuse is a major problem worldwide, manifesting in such conditions as fetal alcohol syndrome, adolescent binge drinking, alcohol dependency, and alcoholic neurodegeneration. The latter is also referred to as alcohol-related brain damage (ARBD). The study of postmortem brain tissue is ideally suited to determining the effects of long-term alcohol abuse, but it also makes an important contribution to understanding pathogenesis across the spectrum of alcohol misuse disorders and potentially other neurodegenerative

diseases. Tissue from the bank has contributed to 330 peer-reviewed journal articles including 120 related to alcohol research. Using the results of these articles, this review chronicles advances in alcohol-related brain research since 2003, the so-called genomic age. In particular, it concentrates on transcriptomic approaches to the pathogenesis of ARBD and builds on earlier reviews of structural changes (Harper et al. Prog Neuropsychopharmacol Biol Psychiatry 2003;27:951) and proteomics (Matsumoto et al. Expert Rev Proteomics 2007;4:539). Copyright 2013 by the Research Society on Alcoholism.

Country of Publication: England

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

Subject Headings:
"*Alcoholism/di [Diagnosis]"
"Alcoholism/ep [Epidemiology]"
"*Alcoholism/ge [Genetics]"
"Australia/ep [Epidemiology]"
Autopsy
"*Brain/pa [Pathology]"
"*Genomics/mt [Methods]"
Humans
"Neurogenesis/ph [Physiology]"
Tissue Banks
"Transcriptome/ge [Genetics]"

Source: MEDLINE

Full Text: Available from *Wiley* in *Alcoholism: Clinical and Experimental Research*

18. Temporal profile of fronto-striatal-limbic activity during implicit decisions in drug dependence.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(108-14), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Yamamoto DJ; Reynolds J; Krmpotich T; Banich MT; Thompson L; Tanabe J

Institution: Department of Radiology, University of Colorado Denver, 12700 E. 19th Avenue, Mail Stop C278, Aurora, CO 80045, USA.; Department of Psychology, University of Denver, 2155 S. Race Street, Denver, CO 80208, USA.; Department of Radiology, University of Colorado Denver, 12700 E. 19th Avenue, Mail Stop C278, Aurora, CO 80045, USA.; Department of Psychiatry, University of Colorado Denver, 13001 E. 17th Place, Mail Stop F546, Aurora, CO 80045, USA; Institute of Cognitive Science, University of Colorado Boulder, D420 Muenziger Building, Campus Box 345, Boulder, CO 80309, USA.; Department of Psychiatry, University of Colorado Denver, 13001 E. 17th Place, Mail Stop F546, Aurora, CO 80045, USA.; Department of Radiology, University of Colorado Denver, 12700 E. 19th Avenue, Mail Stop C278, Aurora, CO 80045, USA; Department of Psychiatry, University of Colorado Denver, 13001 E. 17th Place, Mail Stop F546, Aurora, CO 80045, USA. Electronic address: jody.tanabe@ucdenver.edu.

Language: English

Abstract: BACKGROUND: Substance dependence is associated with impaired decision-making and altered fronto-striatal-limbic activity. Both greater and lesser brain activity have been reported in drug users compared to controls during decision-making. Inconsistent results might be explained by group differences in the temporal profile of the functional magnetic resonance imaging (fMRI) response. While most previous studies model a canonical hemodynamic response, a finite impulse response (FIR) model measures fMRI signal at discrete time points without assuming a temporal profile. We compared brain activity during decision-making and feedback in substance users and controls using two models: a canonical hemodynamic response function (HRF) and a FIR model.METHODS: 37 substance-dependent individuals (SDI) and 43 controls performed event-related decision-making during fMRI scanning. Brain activity was compared across group using canonical HRF and FIR models.RESULTS: Compared to controls, SDI were impaired at decision-making. The canonical HRF model showed that SDI had significantly greater fronto-striatal-limbic activity during decisions and less activity

during feedback than controls. The FIR model confirmed greater activity in SDI during decisions. However, lower activity in SDI during feedback corresponded to a lower post-stimulus undershoot of the hemodynamic response.CONCLUSIONS: Greater activity in fronto-striatal-limbic pathways in SDI compared to controls is consistent with prior work, further supporting the hypothesis that abnormalities in these circuits underlie impaired decision-making. We demonstrate for the first time using FIR analysis that lower activity during feedback may simply reflect the tail end of the hemodynamic response to decision, the post-stimulus undershoot, rather than an actual difference in feedback response.

Country of Publication: Ireland

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

Subject Headings:
Adult
Behavior
"Cerebrovascular Circulation/ph [Physiology]"
"*Decision Making/ph [Physiology]"
Diagnostic and Statistical Manual of Mental Disorders
Female
"Frontal Lobe/bs [Blood Supply]"
"*Frontal Lobe/pp [Physiopathology]"
"Gambling/px [Psychology]"
Humans
Image Processing Computer-Assisted
"Impulsive Behavior/px [Psychology]"
Inpatients
"Limbic System/bs [Blood Supply]"
"*Limbic System/pp [Physiopathology]"
Magnetic Resonance Imaging
Male
"Neostriatum/bs [Blood Supply]"
"*Neostriatum/pp [Physiopathology]"
"*Nerve Net/pp [Physiopathology]"
Socioeconomic Factors
"*Substance-Related Disorders/pp [Physiopathology]"
"*Substance-Related Disorders/px [Psychology]"
Treatment Outcome

Source: MEDLINE

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

19. Behavioral disinhibition in mice bred for high drinking in the dark (HDID) and HS controls increases following ethanol.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(149-52), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Tipps ME; Moschak TM; Mitchell SH

Institution: Department of Behavioral Neuroscience, Oregon Health & Science University, United States.; Department of Behavioral Neuroscience, Oregon Health & Science University, United States.; Department of Behavioral Neuroscience, Oregon Health & Science University, United States; Department of Psychiatry, Oregon Health & Science University, United States; Portland Alcohol Research Center, Oregon Health & Science University, United States. Electronic address: mitchesu@ohsu.edu.

Language: English

Abstract: BACKGROUND: Alcohol consumption and behavioral inhibition share some common underlying genetic mechanisms. The current study examined whether lines of mice selected for high blood ethanol concentrations, attained by heavy drinking in the dark period (DID) of the light-dark cycle that models binge drinking, also exhibit higher levels of drug-naive inhibition. It also examined whether the administration of ethanol would result in higher levels of disinhibition in these selected lines compared to the founder

stock (HS).METHODS: A Go/No-Go task was used to assess baseline inhibition and the effects of acute ethanol on disinhibition (response to a No-Go cue) in the HS line and in mice selected for high levels of DID (HDID-1 and HDID-2).RESULTS: Lines did not differ in inhibition at baseline and all lines showed increased disinhibition following moderate doses of ethanol. Ethanol decreased responding to Go cues for HDID-2 and HS lines at high doses but not HDID-1 mice.CONCLUSIONS: These data corroborate previous work showing ethanol-induced increases in behavioral disinhibition. The selection paradigm did not result in differential sensitivity to the disinhibiting effects of ethanol, but did result in differential sensitivity to the suppressant effects of ethanol on operant behavior between the two HDID lines.

Country of Publication: Ireland

CAS Registry Number: 0 (Central Nervous System Depressants); 3K9958V90M (Ethanol)

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

Subject Headings:
"*Alcohol Drinking/ge [Genetics]"
"*Alcohol Drinking/px [Psychology]"
Animals
"*Behavior Animal/de [Drug Effects]"
"*Binge Drinking/px [Psychology]"
"*Central Nervous System Depressants/pd [Pharmacology]"
"Conditioning Operant/de [Drug Effects]"
Darkness
Data Interpretation Statistical
Disease Models Animal
"*Ethanol/pd [Pharmacology]"
Female
*Inhibition (Psychology)
Male
Mice
Species Specificity

Source: MEDLINE

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

20. The influence of discrimination on smoking cessation among Latinos.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(143-8), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Kendzor DE; Businelle MS; Reitzel LR; Castro Y; Vidrine JI; Mazas CA; Cinciripini PM; Lam CY; Adams CE; Correa-Fernandez V; Cano MA; Wetter DW

Institution: The University of Texas Health Science Center, School of Public Health, United States; The UT Southwestern Harold C. Simmons Comprehensive Cancer Center, United States. Electronic address: Darla.Kendzor@UTSouthwestern.edu.; The University of Texas Health Science Center, School of Public Health, United States; The UT Southwestern Harold C. Simmons Comprehensive Cancer Center, United States.; The University of Houston, College of Education, United States.; The University of Texas, School of Social Work, United States.; The University of Texas MD Anderson Cancer Center, Department of Health Disparities Research, United States.; The University of Texas MD Anderson Cancer Center, Department of Health Disparities Research, United States.; The University of Texas MD Anderson Cancer Center, Department of Behavioral Science, United States.; The University of Texas MD Anderson Cancer Center, Department of Health Disparities Research, United States.; The Catholic University of America, Department of Psychology, United States.; The University of Texas MD Anderson Cancer Center, Department of Health Disparities Research, United States.; The University of Texas MD Anderson Cancer Center, Department of Health Disparities Research, United States.; The University of Texas MD Anderson Cancer Center, Department of Health Disparities Research, United States.

Language: English

Abstract: BACKGROUND: Although studies have shown a cross-sectional link between discrimination and smoking, the prospective influence of discrimination on smoking cessation has yet to be evaluated. Thus, the purpose of the current study was to determine the influence of everyday and major discrimination on smoking cessation among Latinos making a quit attempt.METHODS: Participants were 190 Spanish speaking smokers of Mexican Heritage recruited from the Houston, TX metropolitan area who participated in the study between 2009 and 2012. Logistic regression analyses were conducted to evaluate the associations of everyday and major discrimination with smoking abstinence at 26 weeks post-quit.RESULTS: Most participants reported at least some everyday discrimination (64.4%), and at least one major discrimination event (56%) in their lifetimes. Race/ethnicity/nationality was the most commonly perceived reason for both everyday and major discrimination. Everyday discrimination was not associated with post-quit smoking status. However, experiencing a greater number of major discrimination events was associated with a reduced likelihood of achieving 7-day point prevalence smoking abstinence, OR=.51, p=.004, and continuous smoking abstinence, OR=.29, p=.018, at 26 weeks post-quit.CONCLUSIONS: Findings highlight the high frequency of exposure to discrimination among Latinos, and demonstrate the negative impact of major discrimination events on a smoking cessation attempt. Efforts are needed to attenuate the detrimental effects of major discrimination events on smoking cessation outcomes. Copyright 2014 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:
Adult
Cohort Studies
Cross-Sectional Studies
Female
"*Hispanic Americans/px [Psychology]"
"Hispanic Americans/sn [Statistics and Numerical Data]"
Humans
Language
Logistic Models
Male
"Mexico/eh [Ethnology]"
Middle Aged
"*Prejudice/px [Psychology]"
"Prejudice/sn [Statistics and Numerical Data]"
Prevalence
Prospective Studies
"*Smoking Cessation/px [Psychology]"
"Smoking Cessation/sn [Statistics and Numerical Data]"
Socioeconomic Factors
"Texas/ep [Epidemiology]"
"Tobacco Use Disorder/ep [Epidemiology]"
"United States/ep [Epidemiology]"
Young Adult

Source: MEDLINE

21. Temporal trends in the survival of drug and alcohol abusers according to the primary drug of admission to treatment in Spain.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(115-20), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Sanvisens A; Vallecillo G; Bolao F; Rivas I; Fonseca F; Fuster D; Torrens M; Perez-Hoyos S; Pujol R; Tor J; Muga R

Institution: Department of Internal Medicine, Hospital Universitari Germans Trias i Pujol, Fundacio Institut d'Investigacio en Ciencies de la Salut Germans Trias i Pujol, Universitat

Autonoma de Barcelona, Badalona, Spain.; Institute of Neuropsychiatry & Addictions, Parc de Salut Mar, Universitat Autonoma de Barcelona, Barcelona, Spain.; Department of Internal Medicine, Hospital Universitari de Bellvitge, Universitat de Barcelona, L'Hospitalet de Llobregat, Spain.; Municipal Centre for Substance Abuse Treatment (Centro Delta), IMSP Badalona, Badalona, Spain.; Institute of Neuropsychiatry & Addictions, Parc de Salut Mar, Universitat Autonoma de Barcelona, Barcelona, Spain.; Section of General Internal Medicine, Boston Medical Center, Boston University School of Medicine, Boston, MA, USA.; Institute of Neuropsychiatry & Addictions, Parc de Salut Mar, Universitat Autonoma de Barcelona, Barcelona, Spain.; Department of Preventive Medicine and Public Health, Vall d'Hebron Institut de Recerca, Universitat Autonoma de Barcelona, Barcelona, Spain.; Department of Internal Medicine, Hospital Universitari de Bellvitge, Universitat de Barcelona, L'Hospitalet de Llobregat, Spain.; Department of Internal Medicine, Hospital Universitari Germans Trias i Pujol, Fundacio Institut d'Investigacio en Ciencies de la Salut Germans Trias i Pujol, Universitat Autonoma de Barcelona, Badalona, Spain.; Department of Internal Medicine, Hospital Universitari Germans Trias i Pujol, Fundacio Institut d'Investigacio en Ciencies de la Salut Germans Trias i Pujol, Universitat Autonoma de Barcelona, Badalona, Spain. Electronic address: rmuga.germanstrias@gencat.cat.

Language: English

Abstract: BACKGROUND: Mortality of alcohol and drug abusers is much higher than the general population. We aimed to characterize the role of the primary substance of abuse on the survival of patients admitted to treatment and to analyze changes in mortality over time.METHODS: Longitudinal study analyzing demographic, drug use, and biological data of 5023 patients admitted to three hospital-based treatment units in Barcelona, Spain, between 1985 and 2006. Vital status and causes of death were ascertained from clinical charts and the mortality register. Piecewise regression models were used to analyze changes in mortality.RESULTS: The primary substances of dependence were heroin, cocaine, and alcohol in 3388 (67.5%), 945 (18.8%), and 690 patients (13.7%), respectively. The median follow-up after admission to treatment was 11.6 years (IQR: 6.6-16.1), 6.5 years (IQR: 3.9-10.6), and 4.8 years (IQR: 3.1-7.8) for the heroin-, cocaine-, and alcohol-dependent patients, respectively. For heroin-dependent patients, mortality rate decreased from 7.3x100person-years (p-y) in 1985 to 1.8x100p-y in 2008. For cocaine-dependent patients, mortality rate decreased from 10.7x100p-y in 1985 to <2.5x100p-y after 2004. The annual average decrease was 2% for alcohol-dependent patients, with the lowest mortality rate (3.3x100p-y) in 2008.CONCLUSIONS: Significant reductions in mortality of alcohol and drug dependent patients are observed in recent years in Spain. Preventive interventions, treatment of substance dependence and antiretroviral therapy may have contributed to improve survival in this population.

Country of Publication: Ireland

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

Subject Headings:
Adult
"*Alcoholism/mo [Mortality]"
"Alcoholism/rh [Rehabilitation]"
Cause of Death
"*Cocaine-Related Disorders/mo [Mortality]"
"Cocaine-Related Disorders/rh [Rehabilitation]"
Female
Follow-Up Studies
"HIV Infections/dt [Drug Therapy]"
"HIV Infections/ep [Epidemiology]"
"Hepatitis B Chronic/ep [Epidemiology]"
"Hepatitis C Chronic/ep [Epidemiology]"
"*Heroin Dependence/mo [Mortality]"
"Heroin Dependence/rh [Rehabilitation]"
Humans
International Classification of Diseases
Male

Middle Aged
Regression Analysis
"Spain/ep [Epidemiology]"
"Substance Abuse Treatment Centers/sn [Statistics and Numerical Data]"
"*Substance-Related Disorders/mo [Mortality]"
"Substance-Related Disorders/rh [Rehabilitation]"
Survival Analysis
Treatment Outcome
Young Adult

Source: MEDLINE

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

22. Comparison of categorical alcohol dependence versus a dimensional measure for predicting weekly alcohol use in heavy drinkers.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(121-6), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Fazzino TL; Rose GL; Burt KB; Helzer JE

Institution: Department of Psychology, University of Vermont, 2 Colchester Avenue, Burlington, VT 05401, USA; Department of Psychiatry, University of Vermont, 1 South Prospect Street, Burlington, VT 05401, USA. Electronic address: tfazzino@uvm.edu.; Department of Psychiatry, University of Vermont, 1 South Prospect Street, Burlington, VT 05401, USA.; Department of Psychology, University of Vermont, 2 Colchester Avenue, Burlington, VT 05401, USA.; Department of Psychiatry, University of Vermont, 1 South Prospect Street, Burlington, VT 05401, USA.

Language: English

Abstract: BACKGROUND: The DSM specifies categorical criteria for psychiatric disorders. In contrast, a dimensional approach considers variability in symptom severity and can significantly improve statistical power. The current study tested whether a categorical, DSM-defined diagnosis of Alcohol Dependence (AD) was a better fit than a dimensional dependence measure for predicting change in alcohol consumption among heavy drinkers following a brief alcohol intervention (BI). DSM-IV and DSM-5 alcohol use disorder (AUD) measures were also evaluated.METHODS: Participants (N=246) underwent a diagnostic interview after receiving a BI, then reported daily alcohol consumption using an Interactive Voice Response system. Dimensional AD was calculated by summing the dependence criteria (mean=4.0; SD=1.8). The dimensional AUD measure was a summation of positive Alcohol Abuse plus AD criteria (mean=5.8; SD=2.5). A multi-model inference technique was used to determine whether the DSM-IV categorical diagnosis or dimensional approach would provide a more accurate prediction of first week consumption and change in weekly alcohol consumption following a BI.RESULTS: The Akaike information criterion (AIC) for the dimensional AD model (AIC=7625.09) was 3.42 points lower than the categorical model (AIC=7628.51) and weight of evidence calculations indicated there was 85% likelihood that the dimensional model was the better approximating model. Dimensional AUD models fit similarly to the dimensional AD model. All AUD models significantly predicted change in alcohol consumption (p's=.05).CONCLUSION: A dimensional AUD diagnosis was superior for detecting treatment effects that were not apparent with categorical and dimensional AD models.

Country of Publication: Ireland

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

Subject Headings:
Adult
Aged
Aged 80 and over
"Alcohol Drinking/ep [Epidemiology]"
"*Alcohol Drinking/px [Psychology]"
"Alcohol-Related Disorders/ep [Epidemiology]"

"*Alcohol-Related Disorders/px [Psychology]"
"Alcoholism/ep [Epidemiology]"
"*Alcoholism/px [Psychology]"
Data Interpretation Statistical
Diagnostic and Statistical Manual of Mental Disorders
Female
Humans
Likelihood Functions
Linear Models
Male
Middle Aged
Models Psychological
Predictive Value of Tests
Treatment Outcome
Young Adult

Source: MEDLINE

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

23. Therapeutic infusions of ketamine: do the psychoactive effects matter?.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(153-7), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Dakwar E; Anerella C; Hart CL; Levin FR; Mathew SJ; Nunes EV

Institution: New York State Psychiatric Institute, New York, NY, United States; Columbia College of Physicians and Surgeons, New York, NY, United States. Electronic address: dakware@nyspi.columbia.edu.; New York State Psychiatric Institute, New York, NY, United States.; New York State Psychiatric Institute, New York, NY, United States; Columbia College of Physicians and Surgeons, New York, NY, United States; Department of Psychology, Columbia University, New York, NY, United States.; New York State Psychiatric Institute, New York, NY, United States; Columbia College of Physicians and Surgeons, New York, NY, United States.; Michael E. Debakey VA Medical Center, Houston, TX, United States; Menninger Department of Psychiatry & Behavioral Sciences/Baylor College of Medicine, Houston, TX, United States.; New York State Psychiatric Institute, New York, NY, United States; Columbia College of Physicians and Surgeons, New York, NY, United States.

Language: English

Abstract: BACKGROUND: Sub-anesthetic ketamine infusions may benefit a variety of psychiatric disorders, including addiction. Though ketamine engenders transient alterations in consciousness, it is not known whether these alterations influence efficacy. This analysis evaluates the mystical-type effects of ketamine, which may have therapeutic potential according to prior research, and assesses whether these effects mediate improvements in dependence-related deficits, 24h postinfusion.METHODS: Eight cocaine dependent individuals completed this double-blind, randomized, inpatient study. Three counter-balanced infusions separated by 48h were received: lorazepam (2mg) and two doses of ketamine (0.41mg/kg and 0.71mg/kg, with the former dose always preceding the latter). Infusions were followed within 15min by measures of dissociation (Clinician Administered Dissociative Symptoms Scale: CADSS) and mystical-type effects (adapted from Hood's Mysticism Scale: HMS). At baseline and 24h postinfusion, participants underwent assessments of motivation to stop cocaine (University of Rhode Island Change Assessment) and cue-induced craving (by visual analogue scale for cocaine craving during cue exposure).RESULTS: Ketamine led to significantly greater acute mystical-type effects (by HMS) relative to the active control lorazepam; ketamine 0.71mg/kg was associated with significantly higher HMS scores than was the 0.41mg/kg dose. HMS score, but not CADSS score, was found to mediate the effect of ketamine on motivation to quit cocaine 24h postinfusion.CONCLUSIONS: These findings suggest that psychological mechanisms may be involved in some of the anti-addiction benefits resulting from ketamine. Future research can evaluate whether the psychoactive effects of

ketamine influence improvements in larger samples. Copyright 2014 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Anesthetics, Dissociative); 0 (Crack Cocaine); 0 (Hypnotics and Sedatives); 690G0D6V8H (Ketamine); O26FZP769L (Lorazepam)

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

Subject Headings:
Adult
"Anesthetics Dissociative/ad [Administration and Dosage]"
"*Anesthetics Dissociative/tu [Therapeutic Use]"
"*Cocaine-Related Disorders/dt [Drug Therapy]"
"Cocaine-Related Disorders/px [Psychology]"
Crack Cocaine
Cues
Data Interpretation Statistical
Diagnostic and Statistical Manual of Mental Disorders
"Dissociative Disorders/ci [Chemically Induced]"
"Dissociative Disorders/px [Psychology]"
Dose-Response Relationship Drug
Double-Blind Method
Female
Humans
"Hypnotics and Sedatives/tu [Therapeutic Use]"
Infusions Intravenous
Inpatients
"Ketamine/ad [Administration and Dosage]"
"*Ketamine/tu [Therapeutic Use]"
"Lorazepam/tu [Therapeutic Use]"
Male
"*Motivation/de [Drug Effects]"
Mysticism

Source: MEDLINE

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

24. The effects of chronic ethanol self-administration on hippocampal 5-HT1A receptors in monkeys.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(135-42), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Burnett EJ; Grant KA; Davenport AT; Hemby SE; Friedman DP

Institution: Neuroscience Program, Wake Forest University School of Medicine, Winston-Salem, NC, USA; Department of Physiology & Pharmacology, Wake Forest University School of Medicine, Winston-Salem, NC, USA.; Department of Behavioral Neuroscience, Oregon Health & Science University, Portland, OR, USA.; Department of Physiology & Pharmacology, Wake Forest University School of Medicine, Winston-Salem, NC, USA.; Neuroscience Program, Wake Forest University School of Medicine, Winston-Salem, NC, USA; Department of Physiology & Pharmacology, Wake Forest University School of Medicine, Winston-Salem, NC, USA.; Neuroscience Program, Wake Forest University School of Medicine, Winston-Salem, NC, USA; Department of Physiology & Pharmacology, Wake Forest University School of Medicine, Winston-Salem, NC, USA. Electronic address: dfriedmn@wakehealth.edu.

Language: English

Abstract: BACKGROUND: Chronic alcohol consumption reduces brain serotonin and alters the synaptic mechanisms involved in memory formation. Hippocampal 5-HT1A receptors modulate these mechanisms, but the neuroadaptive response of 5HT1A receptors to chronic alcohol self-administration is not well understood.METHODS: Hippocampal tissue from monkeys that voluntarily self-administered ethanol for 12 months (n=9) and

accompanying controls (n=8) were prepared for in vitro receptor autoradiography and laser capture microdissection. The 5-HT1A receptor antagonist, [(3)H]MPPF, and the agonist, [(3)H]8-OH-DPAT, were used to measure total and G-protein coupled 5-HT1A receptors respectively. The expression of the genes encoding the 5-HT1A receptor and its trafficking protein Yif1B was measured in microdissected dentate gyrus (DG) granule cells and CA1 pyramidal neurons.RESULTS: An increase in G-protein coupled, but not total, receptors was observed in the posterior pyramidal cell layer of CA1 in ethanol drinkers compared to controls. Chronic ethanol self-administration was also associated with an up-regulation of total and G-protein coupled 5-HT1A receptors in the posterior DG polymorphic layer. Changes in receptor binding were not associated with concomitant changes in 5-HT1A receptor mRNA expression. Chronic ethanol self-administration was associated with a significant increase in Yif1B gene expression in posterior CA1 pyramidal neurons.CONCLUSIONS: Chronic, ethanol self-administration up-regulates hippocampal 5-HT1A receptor density in a region-specific manner that does not appear to be due to alterations at the level of transcription but instead may be due to increased receptor trafficking. Further exploration of the mechanisms mediating chronic ethanol-induced 5-HT1A receptor up-regulation and how hippocampal neurotransmission is altered is warranted.

Country of Publication: Ireland

CAS Registry Number: 0 (4-(2' methoxyphenyl)-1-(2'-(N-(2"-pyridinyl)-4-fluorobenzamido)ethyl)piperazine); 0 (Aminopyridines); 0 (Central Nervous System Depressants); 0 (DNA, Complementary); 0 (Piperazines); 0 (Receptors, G-Protein-Coupled); 0 (Serotonin Antagonists); 0 (Serotonin Receptor Agonists); 112692-38-3 (Receptor, Serotonin, 5-HT1A); 3K9958V90M (Ethanol); 63231-63-0 (RNA); 78950-78-4 (8-Hydroxy-2-(di-n-propylamino)tetralin)

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

Subject Headings:
"8-Hydroxy-2-(di-n-propylamino)tetralin/du [Diagnostic Use]"
"Alcoholism/ge [Genetics]"
"*Alcoholism/me [Metabolism]"
"Aminopyridines/du [Diagnostic Use]"
"Aminopyridines/me [Metabolism]"
Animals
Autoradiography
"*Central Nervous System Depressants/pd [Pharmacology]"
"DNA Complementary/bi [Biosynthesis]"
"DNA Complementary/ip [Isolation and Purification]"
"*Ethanol/pd [Pharmacology]"
"Gene Expression/de [Drug Effects]"
"*Hippocampus/de [Drug Effects]"
"*Hippocampus/me [Metabolism]"
Housing Animal
Macaca fascicularis
Male
"Piperazines/du [Diagnostic Use]"
"Piperazines/me [Metabolism]"
Polymerase Chain Reaction
"RNA/bi [Biosynthesis]"
"RNA/ip [Isolation and Purification]"
"*Receptor Serotonin 5-HT1A/de [Drug Effects]"
"Receptor Serotonin 5-HT1A/ge [Genetics]"
"Receptor Serotonin 5-HT1A/me [Metabolism]"
"Receptors G-Protein-Coupled/de [Drug Effects]"
"Receptors G-Protein-Coupled/me [Metabolism]"
Self Administration
"Serotonin Antagonists/du [Diagnostic Use]"
"Serotonin Antagonists/me [Metabolism]"
"Serotonin Receptor Agonists/du [Diagnostic Use]"

Source: MEDLINE

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

25. Randomized clinical trial of disulfiram for cocaine dependence or abuse during buprenorphine treatment.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(36-42), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Schottenfeld RS; Chawarski MC; Cubells JF; George TP; Lappalainen J; Kosten TR

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Language: English

Abstract: BACKGROUND: Disulfiram may be efficacious for treating cocaine dependence or abuse, possibly through inhibiting dopamine beta-hydroxylase (DbetaH). Consequently, this randomized, placebo-controlled clinical trial of disulfiram during buprenorphine maintenance treatment evaluated the study hypothesis that disulfiram is superior to placebo and explored whether disulfiram response is greatest for participants with a single nucleotide polymorphism coding for genetically low DbetaH (T-allele carriers).METHODS: We randomized 177 buprenorphine-treated opioid dependent participants with cocaine dependence or abuse to 12 weeks of double-blind treatment with disulfiram 250mg daily (n=91) or placebo (n=86). Of 155 participants genotyped, 84 were CC-homozygous, and 71 CT or TT genotypes. Primary outcomes included days per week cocaine use, number of cocaine-negative urine tests, and maximum consecutive weeks of cocaine abstinence. We analyzed an intention-to-treat comparison between disulfiram and placebo. We also explored potential pharmacogenetic interactions and examined treatment responses of four participant groups based on medication (disulfiram or placebo) by genotype (CC-homozygous or T-allele carrier) classification.RESULTS: Disulfiram participants reported significantly less frequent cocaine use; the differences in cocaine-negative urine tests or consecutive weeks abstinence were not significant. Frequency of cocaine use was lowest in disulfiram-treated T-allele carriers; differences in cocaine-negative urine tests or consecutive weeks abstinence were not significant among the four medication-genotype groups.CONCLUSIONS: The findings provide limited support for the efficacy of disulfiram for reducing cocaine use and suggest that its mechanism of action may involve inhibition of DbetaH. Further studies of its efficacy, mechanism of action, and pharmacogenetics of response are warranted.

Country of Publication: Ireland

CAS Registry Number: 0 (Alcohol Deterrents); 0 (Narcotic Antagonists); 40D3SCR4GZ (Buprenorphine); 9007-49-2 (DNA); TR3MLJ1UAI (Disulfiram)

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

Subject Headings:
Adolescent
Adult
"Alcohol Deterrents/ae [Adverse Effects]"
"*Alcohol Deterrents/tu [Therapeutic Use]"
"Alcoholism/dt [Drug Therapy]"
"Alcoholism/ge [Genetics]"
"Alcoholism/px [Psychology]"
Alleles
"Buprenorphine/ae [Adverse Effects]"
"*Buprenorphine/tu [Therapeutic Use]"
"*Cocaine-Related Disorders/dt [Drug Therapy]"
"Cocaine-Related Disorders/ge [Genetics]"
"Cocaine-Related Disorders/px [Psychology]"

"DNA/ge [Genetics]"
Data Interpretation Statistical
"Disulfiram/ae [Adverse Effects]"
"*Disulfiram/tu [Therapeutic Use]"
Double-Blind Method
Drug Therapy Combination
Female
Genotype
Humans
Male
Middle Aged
"Narcotic Antagonists/ae [Adverse Effects]"
"*Narcotic Antagonists/tu [Therapeutic Use]"
"Opioid-Related Disorders/co [Complications]"
Pharmacogenetics
Polymerase Chain Reaction
Sample Size
Treatment Outcome
Young Adult

Source: MEDLINE

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

26. The diversion and injection of a buprenorphine-naloxone soluble film formulation.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(21-7), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Larance B; Lintzeris N; Ali R; Dietze P; Mattick R; Jenkinson R; White N; Degenhardt L

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Language: English

Abstract: BACKGROUND: We compared the diversion and injection of a new formulation of buprenorphine, a buprenorphine-naloxone film product (BNX film), with buprenorphine-naloxone tablets (BNX tablets), mono-buprenorphine (BPN) and methadone (MET) in Australia.METHODS: Surveys were conducted with people who inject drugs regularly (PWID) (2004-2012) and opioid substitution treatment (OST) clients (2012, N=543). Key outcome measures: the unsanctioned removal of supervised doses, diversion, injection, motivations, drug liking and street price. Levels of injection among PWID were adjusted for background availability of medication using sales data. Doses not taken as directed by OST clients were adjusted by total number of daily doses dispensed.RESULTS: Among out-of-treatment PWID, levels of injection for BNX film were comparable to those for MET and BNX tablet formulations, adjusting for background availability; BPN injecting levels were higher. Among OST clients, recent injecting of one's medication was similar among clients in all OST types; weekly or more frequent injection of prescribed doses was reported by fewer BNX film clients (3%; 95% CI: 1-6) than BPN clients (11%; 95% CI: 3-17), but at levels similar to those observed

among MET and BNX tablet clients. The proportion of BNX film doses injected was lower than that for BPN and BNX tablets, and equivalent to that for MET. The majority of BNX film doses injected by OST clients were unsupervised doses, although some injection of supervised doses of BNX film did occur. The median price of all buprenorphine forms on the illicit market was the same.CONCLUSIONS: Non-adherence and diversion of the BNX film formulation was similar to MET and BNX tablet formulations; BPN had higher levels of all indicators of non-adherence and diversion.

Country of Publication: Ireland

CAS Registry Number: 0 (Narcotic Antagonists); 0 (Tablets); 36B82AMQ7N (Naloxone); 40D3SCR4GZ (Buprenorphine); UC6VBE7V1Z (Methadone)

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

Subject Headings:
Administration Sublingual
Adult
"Australia/ep [Epidemiology]"
"*Buprenorphine/ad [Administration and Dosage]"
"Buprenorphine/ec [Economics]"
Chemistry Pharmaceutical
Drug Costs
Female
Humans
Injections Intravenous
Male
"Methadone/ad [Administration and Dosage]"
Motivation
"*Naloxone/ad [Administration and Dosage]"
"Naloxone/ec [Economics]"
"*Narcotic Antagonists/ad [Administration and Dosage]"
"Narcotic Antagonists/ec [Economics]"
Opiate Substitution Treatment
"Prescription Drug Diversion/ec [Economics]"
"*Prescription Drug Diversion/sn [Statistics and Numerical Data]"
"Substance Abuse Intravenous/ec [Economics]"
"*Substance Abuse Intravenous/ep [Epidemiology]"
Tablets
Treatment Outcome

Source: MEDLINE

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

27. Losing faith and finding religion: religiosity over the life course and substance use and abuse.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(127-34), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Moscati A; Mezuk B

Institution: Virginia Institute for Psychiatric and Behavioral Genetics, Virginia Commonwealth University, 800 East Leigh Street, Biotech 1, Suite 101, P.O. Box 980126, Richmond, VA 23219, United States. Electronic address: moscatiaa@vcu.edu.; Department of Family Medicine and Population Health, Division of Epidemiology, Virginia Commonwealth University, 830 East Main Street, Eighth Floor, P.O. Box 980212, Richmond, VA 23219, United States.

Language: English

Abstract: BACKGROUND: Religion has only come into the light of scientific inquiry as a factor influencing health and behavior in the last few decades. While religiosity is a protective factor for contemporaneous substance misuse, the relationship between longitudinal changes in religiosity and substance use outcomes is understudied.METHODS: Using data from the National Comorbidity Study - Replication (N=6203), we examined how

changes in religiosity from childhood to adulthood are related to use and abuse/dependence of licit (alcohol and tobacco) and illicit drugs. Multivariable logistic regression was used to account for potential confounders including demographic characteristics, familial disruption during childhood, and comorbid major depression.RESULTS: Religiosity was inversely associated with use and misuse of both licit and illicit substances; however this relationship varied by level of childhood religiosity. Relative to stable levels of religiosity from childhood to adulthood, a 2-unit decrease in religiosity from childhood was associated with increased likelihood of illicit drug use in the past year (odds ratio (OR): 2.43, 95% confidence interval (CI): 1.39-4.25). However, a 2-unit increase in religiosity was also associated with past-year illicit drug use (OR: 1.85, 95% CI: 1.09-3.13). Comparable associations were found with a range of recent and lifetime measures of alcohol, tobacco, and illicit drugs.CONCLUSIONS: Substantial gains or losses in religiosity from childhood to adulthood are associated with substance use and misuse. Findings support the use of a life course approach to understanding the relationship between religiosity and substance use outcomes.

Country of Publication: Ireland

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

Subject Headings:
Adult
Age Factors
Aged
"Alcoholism/ep [Epidemiology]"
"Cocaine-Related Disorders/ep [Epidemiology]"
"Depressive Disorder/co [Complications]"
"Depressive Disorder/px [Psychology]"
Diagnostic and Statistical Manual of Mental Disorders
Educational Status
Ethnic Groups
Female
Health Surveys
Humans
International Classification of Diseases
Male
"Mental Disorders/co [Complications]"
"Mental Disorders/ep [Epidemiology]"
Middle Aged
"Prescription Drug Misuse/sn [Statistics and Numerical Data]"
*Religion
Socioeconomic Factors
"Substance-Related Disorders/ep [Epidemiology]"
"*Substance-Related Disorders/px [Psychology]"
"Tobacco Use Disorder/ep [Epidemiology]"
Treatment Outcome
"United States/ep [Epidemiology]"

Source: MEDLINE

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

28. DSM-5 latent classes of alcohol users in a population-based sample: results from the Sao Paulo Megacity Mental Health Survey, Brazil.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(92-9), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Castaldelli-Maia JM; Silveira CM; Siu ER; Wang YP; Milhoranca IA; Alexandrino-Silva C; Borges G; Viana MC; Andrade AG; Andrade LH; Martins SS

Institution: Section of Psychiatric Epidemiology - LIM 23, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo 05403, Brazil; Interdisciplinary Group of Studies on Alcohol and Drugs, Department and Institute of Psychiatry,

University of Sao Paulo Medical School, Sao Paulo, SP 05403, Brazil; Department of Neuroscience, Medical School, Fundacao do ABC, Santo Andre, SP 09060, Brazil. Electronic address: jmcmaia2@gmail.com.; Section of Psychiatric Epidemiology - LIM 23, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo 05403, Brazil; Interdisciplinary Group of Studies on Alcohol and Drugs, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo, SP 05403, Brazil.; Section of Psychiatric Epidemiology - LIM 23, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo 05403, Brazil.; Section of Psychiatric Epidemiology - LIM 23, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo 05403, Brazil.; Section of Psychiatric Epidemiology - LIM 23, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo 05403, Brazil.; Section of Psychiatric Epidemiology - LIM 23, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo 05403, Brazil.; National Institute of Psychiatry and Metropolitan Autonomous University, Mexico City 14370, Mexico.; Department of Social Medicine and Post-Graduate Program in Public Health, Federal University of Espirito Santo, Vitoria, ES 29040, Brazil.; Interdisciplinary Group of Studies on Alcohol and Drugs, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo, SP 05403, Brazil; Department of Neuroscience, Medical School, Fundacao do ABC, Santo Andre, SP 09060, Brazil.; Section of Psychiatric Epidemiology - LIM 23, Department and Institute of Psychiatry, University of Sao Paulo Medical School, Sao Paulo 05403, Brazil.; Department of Epidemiology, Columbia University Mailman School of Public Health, New York, NY 10032, USA.

Language: English

Abstract: BACKGROUND: We aimed to identify different categorical phenotypes based upon the DSM-V criteria of alcohol use disorders (AUD) among alcohol users who had at least one drink per week in the past year (n=948).METHODS: Data are from the Sao Paulo Megacity Mental Health Survey collected in 2005-2007, as part of the World Mental Health Survey Initiative. A latent class analysis of the 11 DSM-5-AUD criteria was performed using Mplus, taking into account complex survey design features. Weighted logistic regression models were used to examine demographic correlates of the DSM-5-AUD latent classes.RESULTS: The best latent-class model was a three-class model. We found a "non-symptomatic class" (69.7%), a "use in larger amounts class" (23.2%), defined by high probability (>70%) of the "use in larger amounts" criterion only, and a "high-moderate symptomatic class" (7.1%), defined by high-moderate probability of all the 11 AUD criteria. Compared to those in the non-symptomatic class, individuals in the "high-moderate symptomatic class" were more likely to have been married, have lower educational attainment and to be unemployed or in non-regular/informal employment. Those on the "use in larger amounts class" were more likely to have been married or never married.CONCLUSION: The two symptomatic classes clearly represented the dimensionality of the new proposed AUD criteria, and could be more specifically targeted by different prevention or treatment strategies. DSM-5-AUD has the advantage of shedding light on risky drinkers included in the "use in larger amounts class", allowing for preventive interventions, which will reach a large number of individuals.

Country of Publication: Ireland

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

Subject Headings:
Adolescent
Adult
"Alcohol Drinking/ep [Epidemiology]"
"Alcohol Drinking/px [Psychology]"
"*Alcoholism/ep [Epidemiology]"
"*Alcoholism/px [Psychology]"
"Brazil/ep [Epidemiology]"
Data Interpretation Statistical
Diagnostic and Statistical Manual of Mental Disorders
Educational Status
Female

Health Surveys
Humans
Male
Mental Health
Middle Aged
Prevalence
Socioeconomic Factors
Urban Population
Young Adult

Source: MEDLINE

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

29. Investigation of sex-dependent effects of cannabis in daily cannabis smokers.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(85-91), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Cooper ZD; Haney M

Institution: Division on Substance Abuse, New York State Psychiatric Institute and Department of Psychiatry, College of Physicians and Surgeons of Columbia University, USA. Electronic address: zc2160@columbia.edu.; Division on Substance Abuse, New York State Psychiatric Institute and Department of Psychiatry, College of Physicians and Surgeons of Columbia University, USA.

Language: English

Abstract: BACKGROUND: Women exhibit an accelerated progression from first cannabis use to cannabis use disorder (CUD) and show pronounced negative clinical issues related to CUD relative to men. Whether sex-dependent differences in cannabis' direct effects contribute to the heightened risk in women is unknown. This analysis directly compared cannabis' abuse-related subjective effects in men and women matched for current cannabis use.METHODS: Data from four double-blind, within-subject studies measuring the effects of active cannabis (3.27-5.50% THC, depending on study) relative to inactive cannabis (0.00% THC) were combined for this analysis. Data from equal numbers of men and women from each study matched for current cannabis use were pooled (total n=35 men; 35 women); cannabis' effects were analyzed according to cannabis condition (active versus inactive) and sex.RESULTS: Active cannabis produced more robust subjective effects associated with abuse liability ('Good,' 'Liking,' 'Take Again') and intoxication ('High,' 'Stimulated') relative to inactive cannabis ($p<0.0001$). Women reported higher ratings of abuse-related effects ['Take Again' and 'Good' ($p<0.05$)] relative to men under active cannabis conditions but did not differ in ratings of intoxication. Active cannabis increased heart rate ($p<0.0001$) equally for both sexes.CONCLUSIONS: The results from this study suggest that when matched for cannabis use, women are more sensitive to the subjective effects related to cannabis' abuse liability relative to men, which may contribute to the enhanced vulnerability to developing CUD. Thus, sex is an important variable to consider when assessing the development of CUD.

Country of Publication: Ireland

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

Subject Headings:
Adult
Alcohol Drinking
Data Interpretation Statistical
Disease Progression
Double-Blind Method
Female
"Heart Rate/de [Drug Effects]"
"Hemodynamics/de [Drug Effects]"
Humans
Male
"*Marijuana Abuse/px [Psychology]"

"*Marijuana Smoking/px [Psychology]"
Middle Aged
Sex Characteristics
Young Adult

Source: MEDLINE

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

30. Estimating the causal effects of cumulative treatment episodes for adolescents using marginal structural models and inverse probability of treatment weighting.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(69-78), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Griffin BA; Ramchand R; Almirall D; Slaughter ME; Burgette LF; McCaffery DF

Institution: RAND Corporation, United States. Electronic address: bethg@rand.org.; RAND Corporation, United States.; Institute for Social Research, United States.; RAND Corporation, United States.; RAND Corporation, United States.; RAND Corporation, United States.

Language: English

Abstract: BACKGROUND: Substance use treatment is rarely a one-time event for individuals with substance use disorders. Sustained reductions in substance use and its related symptoms may result from multiple treatment episodes.METHODS: We use a marginal structural model with inverse-probability-of-treatment weighting to estimate the causal effects of cumulative treatment experiences over a period of 9 months on drug use at the end of 1-year among 2870 adolescents receiving care in community-based treatment settings. During the 9 months, adolescents move in and out of outpatient and residential treatment with periods where they only receive biological drug screening (BDS) or no treatment at all. The use of inverse-probability-of-treatment weighting reduces confounding bias due to observed baseline and time-varying measures over the course of follow-up; weights were estimated using generalized boosted models.RESULTS: Each additional period of treatment (representing at least one day, 1 session, or 1 BDS during the 90 day period between follow-up visits) yielded reductions in average substance use frequency at 1-year relative to no treatment during the 90-day period. For residential treatment it was a 16% decrease (95% CI=-27%, -7%), for outpatient treatment it was a 9% decrease (95% CI=-18%, -0%), and for BDS (with no additional outpatient or residential treatment) it was an 11% decrease (95% CI=-20%, -3%).CONCLUSIONS: Using robust statistical methods, we find promising (albeit preliminary) evidence that additional periods of outpatient and residential treatment, as well as biological drug screening, lead to reductions in substance use outcomes at one year.

Country of Publication: Ireland

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

Subject Headings:
Adolescent
Algorithms
Ambulatory Care
Data Interpretation Statistical
Female
Humans
Male
Models Statistical
Residential Treatment
Socioeconomic Factors
Substance Abuse Detection
Substance Abuse Treatment Centers
"Substance-Related Disorders/ep [Epidemiology]"
"*Substance-Related Disorders/rh [Rehabilitation]"

Treatment Outcome
United States

Source: MEDLINE

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

31. Prevalence and correlates of alcohol and cannabis use disorders in the United States: results from the national longitudinal study of adolescent health.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(158-61), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Haberstick BC; Young SE; Zeiger JS; Lessem JM; Hewitt JK; Hopfer CJ

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Language: English

Abstract: BACKGROUND: Limited current information on the epidemiology of lifetime alcohol and cannabis use disorders in the United States is available.AIMS: To present detailed information about the prevalence and sociodemographic correlates of lifetime alcohol and cannabis use disorders rates in the United States. To examine gender differences in hazard ratios for the onset of alcohol and cannabis dependence.METHODS: Participants in Wave IV of the National Longitudinal Study of Adolescent Health (N=15,500, age range: 24-32) were interviewed between 2008 and 2009. Participants who exceeded screening thresholds were queried about lifetime DSM-IV alcohol and marijuana abuse and dependence symptoms. Age of substance dependence onset was queried.RESULTS: Lifetime rates of alcohol abuse and dependence were 11.8 and 13.2%. Lifetime rates of cannabis abuse and dependence were 3.9 and 8.3%. Lifetime alcohol and cannabis dependence onset peaks were 23 and 20. Correlates of lifetime alcohol abuse included being male (OR 1.4), African-American (OR 0.7), income in the 2nd or 3rd quartile (OR 0.7 and 0.6). Correlates of lifetime alcohol dependence were: being male (OR 1.8), African-American (OR 0.5), and never being married (OR 1.5), and regions outside of the west (Midwest OR 0.7, South OR 0.6, Northeast OR 0.6). Correlates of cannabis abuse and dependence were being male (OR 1.8 and 1.4).CONCLUSIONS: Lifetime alcohol and cannabis use disorders are highly prevalent in the US population. Men are at higher risk for alcohol and cannabis use disorders. Alcohol use disorders demonstrated specific sociodemographic correlates while marijuana use disorders did not. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

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

Subject Headings:
Adolescent
Adolescent Behavior
Adult
"*Alcoholism/ep [Epidemiology]"
Educational Status
Ethnic Groups
Female
Humans
Longitudinal Studies
Male
"*Marijuana Abuse/ep [Epidemiology]"
Prevalence
Socioeconomic Factors
"United States/ep [Epidemiology]"
Young Adult

Source: MEDLINE

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

32. Adolescent alcohol use and alcohol use disorders in Mexico City.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(43-50), 0376-8716;1879-0046 (2014 Mar 1)

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

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 14370, Mexico. Electronic address: cbenjet@imp.edu.mx.; Department of Epidemiological and Psychosocial Research, National Institute of Psychiatry Ramon de la Fuente, Calzada Mexico Xochimilco 101, Colonia San Lorenzo Huipulco, Mexico City 14370, Mexico.; Department of Epidemiological and Psychosocial Research, National Institute of Psychiatry Ramon de la Fuente, Calzada Mexico Xochimilco 101, Colonia San Lorenzo Huipulco, Mexico City 14370, Mexico.; Department of Epidemiological and Psychosocial Research, National Institute of Psychiatry Ramon de la Fuente, Calzada Mexico Xochimilco 101, Colonia San Lorenzo Huipulco, Mexico City 14370, Mexico.; Department of Epidemiological and Psychosocial Research, National Institute of Psychiatry Ramon de la Fuente, Calzada Mexico Xochimilco 101, Colonia San Lorenzo Huipulco, Mexico City 14370, Mexico.

Language: English

Abstract: OBJECTIVE: To estimate the prevalence, sex, age distribution, and socio-demographic correlates of any alcohol use, consumption patterns, and any alcohol use disorder in a representative sample of Mexican adolescents.METHODS: 3005 youth (52.1% female) aged 12-17 from a stratified multistage area probability sample were representative of adolescents residing in the Mexico City Metropolitan Area. Alcohol use and disorder and their socio-demographic correlates were evaluated with the World Mental Health adolescent version of the Composite International Diagnostic Interview. Data were post-stratified to the total Mexico City adolescent population.RESULTS: 59% has used alcohol, this proportion increasing significantly with age. By age 17, 82.5% has used alcohol. Consumption patterns are mostly of low/moderate quantity or infrequent high quantity. Lifetime DSM-IV alcohol use disorder criteria are met by 3.8%, reaching 8.1% for 16-17 years-olds. While males have greater frequency and quantity of drinking, there are no gender differences for alcohol use disorders. Non-school attending youth have twice the odds of a lifetime (OR=2.0, 95% CI=1.13-3.53) and 12-month disorder (OR=2.1, 95% CI=1.10-4.15). Low parental monitoring is associated with 1.72 times the odds of a lifetime disorder (95% CI=1.10-2.68).CONCLUSIONS: Over a third of 12 year-olds had ever drunk an alcoholic beverage in their lifetime suggesting that the prevention of alcohol use and disorders must begin in late childhood. Initiatives to foment parental monitoring and to prevent, identify, and treat alcohol use problems in non-school attending youth in particular should be a priority for the wellbeing of Mexico City adolescents.

Country of Publication: Ireland

Publication Type: Journal Article

Subject Headings:
Adolescent
Age Factors
Age of Onset
"*Alcohol Drinking/ep [Epidemiology]"
"*Alcoholism/ep [Epidemiology]"
Child
Data Interpretation Statistical
Diagnostic and Statistical Manual of Mental Disorders
Female
Health Surveys
Humans
Logistic Models

Male
Mental Health
"Mexico/ep [Epidemiology]"
Prevalence
Sex Factors
Socioeconomic Factors
Urban Population

Source: MEDLINE

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

33. Looking for the uninsured in Massachusetts? Check opioid dependent persons seeking detoxification.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(166-9), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Stein MD; Bailey GL; Thurmond P; Paull N

Institution: General Medicine Research Unit, Butler Hospital, Providence, RI 02906, United States; Warren Alpert Medical School of Brown University, Providence, RI 02912, United States. Electronic address: Michael_Stein@brown.edu.; Warren Alpert Medical School of Brown University, Providence, RI 02912, United States; Stanley Street Treatment and Resources, Inc., Fall River, MA 02720, United States.; General Medicine Research Unit, Butler Hospital, Providence, RI 02906, United States.; Stanley Street Treatment and Resources, Inc., Fall River, MA 02720, United States.

Language: English

Abstract: BACKGROUND: We examined the rate of uninsurance among persons seeking detoxification at a large drug treatment program in Massachusetts in 2013, five years after insurance mandates.METHODS: We interviewed three hundred and forty opioid dependent persons admitted for inpatient detoxification in Fall River, Massachusetts. Potential predictors of self-reported insurance status included age, gender, ethnicity, employment, homelessness, years of education, current legal status, and self-perceived health status.RESULTS: Participants mean age was 32 years, 71% were male, and 87% were non-Hispanic Caucasian. Twenty-three percent were uninsured. In the multivariate model, the odds of being uninsured was positively associated with years of education (OR=1.22, 95% CI=1.03; 1.46, p<.05), higher among males than females (OR=2.63, 95% CI=1.33; 5.20, p<.01), and inversely associated with age (OR=0.94, 95% CI=0.90; 0.98, p<.01).CONCLUSION: Opioid dependent persons recruited from a detoxification program in Massachusetts are uninsured at rates far above the state average. With the arrival of the Affordable Care Act, drug treatment programs in Massachusetts and nationally will be important sites to target to expand health coverage.

Country of Publication: Ireland

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

Subject Headings:
Adult
Age Factors
Educational Status
Ethnic Groups
Female
Humans
Insurance Coverage
"Insurance Health/lj [Legislation and Jurisprudence]"
"Insurance Health/sn [Statistics and Numerical Data]"
Male
"Massachusetts/ep [Epidemiology]"
"*Medically Uninsured/sn [Statistics and Numerical Data]"
"Opioid-Related Disorders/ep [Epidemiology]"
"*Opioid-Related Disorders/rh [Rehabilitation]"
"*Patient Acceptance of Health Care/sn [Statistics and Numerical Data]"
Patient Protection and Affordable Care Act

Sex Factors
Socioeconomic Factors
Treatment Outcome

Source: MEDLINE

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

34. Early adolescent patterns of alcohol, cigarettes, and marijuana polysubstance use and young adult substance use outcomes in a nationally representative sample.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(51-62), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Moss HB; Chen CM; Yi HY

Institution: National Institute on Alcohol Abuse and Alcoholism, United States. Electronic address: psych.hmossmd@gmail.com.; Alcohol Epidemiologic Data System, CSR, Incorporated, United States.; Alcohol Epidemiologic Data System, CSR, Incorporated, United States.

Language: English

Abstract: BACKGROUND: Alcohol, tobacco and marijuana are the most commonly used drugs by adolescents in the U.S. However, little is known about the patterning of early adolescent substance use, and its implications for problematic involvement with substances in young adulthood. We examined patterns of substance use prior to age 16, and their associations with young adult substance use behaviors and substance use disorders in a nationally representative sample of U.S. adolescents.METHOD: Using data from Wave 4 of the Add Health Survey (n=4245), we estimated the prevalence of various patterns of early adolescent use of alcohol, cigarettes, and marijuana use individually and in combination. Then we examined the effects of patterns of early use of these substances on subsequent young adult substance use behaviors and DSM-IV substance use disorders.RESULTS: While 34.4% of individuals reported no substance use prior to age 16, 34.1% reported either early use of both alcohol and marijuana or alcohol, marijuana and cigarettes, indicating the relatively high prevalence of this type of polysubstance use behavior among U.S. adolescents. Early adolescent use of all three substances was most strongly associated with a spectrum of young adult substance use problems, as well as DSM-IV substance use disorder diagnoses.CONCLUSIONS: This research confirms the elevated prevalence and importance of polysubstance use behavior among adolescents prior to age 16, and puts early onset of alcohol, marijuana and cigarette use into the context of use patterns rather than single drug exposures. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

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

Subject Headings:
Adolescent
Age of Onset
"*Alcohol Drinking/ep [Epidemiology]"
"*Alcohol Drinking/px [Psychology]"
Diagnostic and Statistical Manual of Mental Disorders
Ethnic Groups
Female
Humans
Inhibition (Psychology)
Longitudinal Studies
Male
"*Marijuana Smoking/ep [Epidemiology]"
"*Marijuana Smoking/px [Psychology]"
Prevalence
Risk Assessment
"*Smoking/ep [Epidemiology]"
"*Smoking/px [Psychology]"
Socioeconomic Factors
"*Substance-Related Disorders/ep [Epidemiology]"
"*Substance-Related Disorders/px [Psychology]"

"United States/ep [Epidemiology]"
Young Adult

Source: MEDLINE

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

35. A two-phased screening paradigm for evaluating candidate medications for cocaine cessation or relapse prevention: modafinil, levodopa-carbidopa, naltrexone.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(100-7), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Schmitz JM; Green CE; Stotts AL; Lindsay JA; Rathnayaka NS; Grabowski J; Moeller FG

Institution: Department of Psychiatry and Behavioral Sciences, University of Texas, Houston, United States. Electronic address: Joy.M.Schmitz@uth.tmc.edu.; Center for Clinical Research & Evidence-Based Medicine, University of Texas, Houston, United States.; Department of Family and Community Medicine, University of Texas, Houston, United States.; Menninger Department of Psychiatry & Behavioral Sciences, Baylor College of Medicine, United States; Veterans Affairs South Central Mental Illness Research, Education, and Clinical Center, United States; Houston VA Health Services Research & Development Center of Excellence, United States.; Department of Psychiatry and Behavioral Sciences, University of Texas, Houston, United States.; Department of Psychiatry, Medical School, University of Minnesota, United States.; Department of Psychiatry, Virginia Commonwealth University, United States.

Language: English

Abstract: BACKGROUND: Cocaine pharmacotherapy trials are often confounded by considerable variability in baseline cocaine-use levels, obscuring possible medication efficacy. Testing the feasibility of using a prerandomization, abstinence-induction protocol, we screened three candidate medications to explore treatment response in patients who did, or did not, achieve abstinence during an extended baseline phase.METHOD: Eligible treatment-seeking, cocaine-dependent subjects entered a 4-week baseline period (Phase I) with high-value abstinence contingent vouchers and two motivational interviewing sessions, followed by a 12-week medication trial (Phase II) with random assignment stratified on Phase I abstinence status to (1) modafinil (400mg/d), (2) levodopa/carbidopa (800/200mg/d), (3) naltrexone (50mg/d), or (4) placebo. Treatment consisted of thrice-weekly clinic visits for urine benzoylecgonine testing and weekly cognitive behavioral therapy with contingency management targeting medication compliance.RESULTS: Of the 118 subjects enrolled, 81 (80%) completed Phase I, with 33 (41%) achieving abstinence, defined a priori as 6 consecutive cocaine-negative urines. Tests of the interaction of each medication (active versus placebo) by baseline status (abstinent versus nonabstinent) permitted moderator effect analysis. Overall, baseline abstinence predicted better outcome. Cocaine-use outcomes for levodopa and naltrexone treatment differed as a function of Phase I abstinence status, with both medications producing benefit in nonabstinent but not baseline-abstinent subjects. There was no evidence of a moderator effect for modafinil.CONCLUSIONS: The two-phase screening trial demonstrated that subgrouping of patients with respect to baseline abstinence status is feasible and clinically useful for exploring cocaine cessation and relapse-prevention effects of candidate medications.

Country of Publication: Ireland

CAS Registry Number: 0 (Benzhydryl Compounds); 0 (Central Nervous System Stimulants); 0 (Dopamine Agents); 0 (Narcotic Antagonists); 46627O600J (Levodopa); 5S6W795CQM (Naltrexone); MNX7R8C5VO (Carbidopa); R3UK8X3U3D (modafinil)

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

Subject Headings: Adolescent
Adult
"Benzhydryl Compounds/ae [Adverse Effects]"

"*Benzhydryl Compounds/tu [Therapeutic Use]"
"Carbidopa/ae [Adverse Effects]"
"*Carbidopa/tu [Therapeutic Use]"
"Central Nervous System Stimulants/ae [Adverse Effects]"
"*Central Nervous System Stimulants/tu [Therapeutic Use]"
"*Cocaine-Related Disorders/dt [Drug Therapy]"
"*Cocaine-Related Disorders/px [Psychology]"
"Cocaine-Related Disorders/th [Therapy]"
Cognitive Therapy
Data Interpretation Statistical
Diagnostic and Statistical Manual of Mental Disorders
"Dopamine Agents/ae [Adverse Effects]"
"*Dopamine Agents/tu [Therapeutic Use]"
Female
Humans
"Levodopa/ae [Adverse Effects]"
"*Levodopa/tu [Therapeutic Use]"
Male
Middle Aged
Motivational Interviewing
"Naltrexone/ae [Adverse Effects]"
"*Naltrexone/tu [Therapeutic Use]"
"Narcotic Antagonists/ae [Adverse Effects]"
"*Narcotic Antagonists/tu [Therapeutic Use]"
Neuropsychological Tests
Patient Compliance
"Recurrence/pc [Prevention and Control]"
Treatment Outcome
Young Adult

Source: MEDLINE

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

36. Does urine drug abuse screening help for managing patients? A systematic review.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(11-20), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Dupouy J; Memier V; Catala H; Lavit M; Oustric S; Lapeyre-Mestre M

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Language: English

Abstract: BACKGROUND: In the field of addiction, assessment of psychoactive substance use is a key element. Nevertheless, self-reports and clinical examination underestimate the use of psychoactive substances. The implementation of urine drug screening tests (UDS) should improve this assessment. While the diagnostic value of UDS is well demonstrated, the consequences of carrying out UDS on medical management have not been established. Our aim was to summarize the evidence pertaining to the efficacy of UDS for medical management.METHODS: A systematic review of clinical trials, quasi-randomized and observational studies was performed using PubMed, Cochrane database of systematic

review, Cochrane central register of controlled trials, PsycINFO, National Institute on Drug Abuse, ISI Web of Science. The methodological quality was assessed with the score developed by Starrels et al.; the report quality using the CONSORT and the STROBE checklists. The main outcome was medical management or consequences of management for patients in terms of psychoactive substance consumption and its complications, be they medical, social or professional.RESULTS: Eight studies met the inclusion criteria: one randomized clinical trial, two quasi-randomized studies, one cohort, and four cross-sectional studies. The methodological quality was judged to be poor, with the exception of the randomized clinical trial (fair quality). The value of UDS in managing patients was not clearly indicated in these studies.CONCLUSIONS: Few studies, with poor quality, have assessed the value of UDS in managing patients using psychoactive substances; though with insufficiency to demonstrate the interest of carrying out UDS. Therefore, pragmatic intervention studies are necessary. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Meta-Analysis; Review

Subject Headings:
Cross-Sectional Studies
Data Interpretation Statistical
"Emergency Medical Services/sn [Statistics and Numerical Data]"
Humans
Inpatients
Outpatients
Randomized Controlled Trials as Topic
Research Design
"*Substance Abuse Detection/mt [Methods]"
"*Substance-Related Disorders/rh [Rehabilitation]"
"*Substance-Related Disorders/ur [Urine]"
Treatment Outcome

Source: MEDLINE

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

37. Smoking cessation behaviors among persons with psychiatric diagnoses: results from a population-level state survey.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(63-8), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Morris CD; Burns EK; Waxmonsky JA; Levinson AH

Institution: Behavioral Health & Wellness Program, University of Colorado, Anschutz Medical Campus, Department of Psychiatry, Campus Box F478, Aurora, CO 80045, United States. Electronic address: chad.morris@ucdenver.edu.; Colorado School of Public Health, Department of Epidemiology, 13001 East 17(th) Place, Aurora, CO 80045, United States.; Depression Center, University of Colorado, Anschutz Medical Campus, Department of Psychiatry, Aurora, CO 80045, United States.; Colorado School of Public Health, Department of Community & Behavioral Health, and University of Colorado Cancer Center, 13001 East 17(th) Place, Aurora, CO 80045, United States.

Language: English

Abstract: BACKGROUND: Persons with psychiatric illnesses are disproportionally affected by tobacco use, smoking at rates at least twice that of other adults. Intentions to quit are known to be high in this population, but population-level cessation behaviors and attitudes by mental health (MH) diagnosis are not well known.METHODS: A population-level survey was conducted in 2008 to examine state-level tobacco attitudes and behaviors in Colorado. Respondents were eligible for the study if they had non-missing values for smoking status (n=14,118). Weighted descriptive and multivariate analyses were conducted of smoking prevalence, cessation behaviors, and attitudes toward cessation by MH status and specific diagnosis.RESULTS: Among respondents with MH diagnoses, smoking was twice as prevalent as among respondents without an MH diagnosis, adjusted for demographic characteristics (adjusted odds ratio 2.2, 95%

confidence interval 1.6-3.1). Compared to smokers without an MH diagnosis, those with MH diagnoses were more likely to attempt quitting (58.7% vs. 44.4%, p<0.05), use nicotine replacement therapy more often, and succeed in quitting at similar rates. Smokers with anxiety/PTSD were less likely to quit successfully compared those with other MH diagnoses (0.7% vs. 11.9%, p=0.03).CONCLUSIONS: This population-level analysis found that smokers with mental illness are more likely than those without mental illness to attempt quitting and to use cessation treatment at similar rates, but those with anxiety are less likely to achieve short-term abstinence. Additional approaches are needed for smokers with mental illness in order to reach and sustain long-term abstinence from smoking.

Country of Publication: Ireland

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

Subject Headings:
Adolescent
Adult
Aged
"Anxiety Disorders/px [Psychology]"
Attitude
"Colorado/ep [Epidemiology]"
"Depressive Disorder/px [Psychology]"
Ethnic Groups
Female
Health Surveys
Humans
Male
"*Mental Disorders/px [Psychology]"
Middle Aged
Population
Poverty
Prevalence
"Smoking/px [Psychology]"
"*Smoking Cessation/px [Psychology]"
Socioeconomic Factors
"Stress Disorders Post-Traumatic/px [Psychology]"
"Tobacco Use Disorder/px [Psychology]"
Young Adult

Source: MEDLINE

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

38. Suicide and substance use among female veterans: a need for research.

Citation: Drug & Alcohol Dependence, March 2014, vol./is. 136/(1-10), 0376-8716;1879-0046 (2014 Mar 1)

Author(s): Chapman SL; Wu LT

Institution: Department of Psychiatry and Behavioral Sciences, School of Medicine, Duke University Medical Center, Durham, NC 27710, USA. Electronic address: Shawna.Chapman@dm.duke.edu.; Department of Psychiatry and Behavioral Sciences, School of Medicine, Duke University Medical Center, Durham, NC 27710, USA.

Language: English

Abstract: BACKGROUND: The number of female veterans is increasing. Veterans Administration (VA) enrollment increased over 40% from past eras. However, little research has focused on their mental health. We reviewed literature to examine associations of substance use with suicide in female veterans, identify research gaps, and inform future studies.METHODS: Google Scholar, Pub Med, and PsychINFO were searched using: substance use, female veteran, and suicide. Exclusion criteria (e.g., not discussing U.S. veterans) left 17 articles.RESULTS: Nine studies examined completed suicide among veterans. In most recent years, rates of deaths were greater for veterans than nonveterans, including females. Completed suicide was associated with past trauma, young age, and a

mental disorder. Studies have often not addressed substance use. Three studies examined completed suicide among VA treated veterans without examining substance use as an associated factor. Rates of completed suicides were also higher among veterans than nonveterans, including females. A large proportion of females also had a mental diagnosis. Five studies examined substance use and attempted or completed suicide among VA treated veterans. Veterans in poor mental health had increased odds of suicide mortality; women with a substance use disorder (SUD) had a higher hazard ratio for completed suicide than men with a SUD. Engagement in substance abuse treatment decreased odds of suicide attempt among veterans.CONCLUSION: Available data suggest that suicide rates are higher among female veterans than women in the general population. Substance use may increase the likelihood of suicidal behaviors among female veterans, particularly those with a mental diagnosis. Copyright 2013 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

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

Subject Headings:
Adult
Aged
Female
Humans
Middle Aged
"*Substance-Related Disorders/ep [Epidemiology]"
"*Suicide/sn [Statistics and Numerical Data]"
"United States/ep [Epidemiology]"
United States Department of Veterans Affairs
"*Veterans/px [Psychology]"
"*Women/px [Psychology]"
Young Adult

Source: MEDLINE

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

39. Paracetamol poisoning in the UK: a meeting report from Pharmacology 2013.

Citation: Expert Review of Clinical Pharmacology, March 2014, vol./is. 7/2(147-9), 1751-2433;1751-2441 (2014 Mar)

Author(s): Carthy ER; Ellis SD

Institution: School of Medicine, Imperial College London, London SW7 2AZ, UK.

Language: English

Abstract: Pharmacology 2013; a meeting of the British Pharmacological Society Queen Elizabeth II Conference Centre, Westminster, London, UK, 17-19 December 2013 Pharmacology 2013 is the annual meeting of the British Pharmacological Society, and was held on 17-19th December 2013 at the Queen Elizabeth II Conference Centre in Westminster, London. This report will discuss the symposium entitled 'Paracetamol poisoning in the United Kingdom - where are we now and what is the future?' Paracetamol overdose is a common and important presentation to emergency departments. This symposium and report aim to highlight current practice legislation surrounding the purchase of paracetamol and its compounds, and novel biomarkers for the diagnosis and identification of high-risk groups who require efficient instigation of treatment.

Country of Publication: England

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

Publication Type: Congresses

Subject Headings:
"*Acetaminophen/po [Poisoning]"
"*Analgesics Non-Narcotic/po [Poisoning]"
"Biological Markers/me [Metabolism]"
"Drug Overdose/ep [Epidemiology]"
"Emergency Service Hospital/sn [Statistics and Numerical Data]"

"Great Britain/ep [Epidemiology]"
Humans
Risk

Source: MEDLINE

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

40. An Internet snapshot study to compare the international availability of the novel psychoactive substance methiopropamine.

Citation: Clinical Toxicology: The Official Journal of the American Academy of Clinical Toxicology & European Association of Poisons Centres & Clinical Toxicologists, August 2014, vol./is. 52/7(678-81), 1556-3650;1556-9519 (2014 Aug)

Author(s): Vermette-Marcotte AE; Dargan PI; Archer JR; Gosselin S; Wood DM

Institution: Emergency Department & Medical Toxicology Consultation Service, McGill University Health Centre , Montreal, Quebec , Canada.

Language: English

Abstract: CONTEXT: With the increased use of novel psychoactive substances, there is an increasing availability of these substances from Internet-based suppliers. Methiopropamine, first reported in 2011, is a recreational drug available over the Internet. The aim of this study was to investigate availability and cost of methiopropamine in three different countries: the UK, France, and Canada.METHODS: Using the European Monitoring Centre for Drugs and Drug Addiction Internet snapshot methodology, this study, conducted in June 2013, was undertaken in two different languages: in English (the UK and Canada) and in French (France and Canada), using three Internet searching engines: " google.co.uk ", " google.fr " and " google.ca ".RESULTS: A total of 62 sites were found, most of them were found from the English searches. 45% of the suppliers seemed to originate from the UK. The prices of methiopropamine were comparable between suppliers, no matter which search engine or language was used. The cost of a unit of methiopropamine was inversely related to the purchased quantity, going from 19.49 + 0.15 GBP per gram for a purchase amount of 500 mg to 3.54 + 0.13 GBP per gram for a purchase amount of 1 kg.DISCUSSION: The results of the present study demonstrate that the sale of methiopropamine has the potential to reach users across the world. It also appears to support that snapshot studies could be used for toxicovigilance across different countries, by studying the Internet market of novel psychoactive substances.CONCLUSION: To date, snapshot studies, used to monitor the Internet novel psychoactive substances market, have only been undertaken in Europe. We have shown that the flexibility of this methodology enables comparison of the online activity of drug sellers between different countries and continents and that, at least for methiopropamine, the UK is the predominant source for Internet supply.

Country of Publication: England

CAS Registry Number: 0 (1-(2-thienyl)-2-(methylamino)propane); 0 (Central Nervous System Stimulants); 0 (Designer Drugs); 0 (Psychotropic Drugs); 0 (Thiophenes); 44RAL3456C (Methamphetamine)

Publication Type: Comparative Study; Journal Article

Subject Headings: Canada
"Central Nervous System Stimulants/ec [Economics]"
"Central Nervous System Stimulants/to [Toxicity]"
"Designer Drugs/ec [Economics]"
"*Designer Drugs/to [Toxicity]"
"Drug and Narcotic Control/mt [Methods]"
France
Great Britain
Humans

Internet
"*Methamphetamine/aa [Analogs and Derivatives]"
"Methamphetamine/ec [Economics]"
"Methamphetamine/to [Toxicity]"
"Psychotropic Drugs/ec [Economics]"
"Psychotropic Drugs/sd [Supply and Distribution]"
"*Psychotropic Drugs/to [Toxicity]"
"Thiophenes/ec [Economics]"
"*Thiophenes/to [Toxicity]"

Source: MEDLINE

Full Text: Available from *Informa Healthcare* in *Clinical Toxicology*

41. Synthetic cathinones: "a khat and mouse game".

Citation: Toxicology Letters, September 2014, vol./is. 229/2(349-56), 0378-4274;1879-3169 (2014 Sep 2)

Author(s): Katz DP; Bhattacharya D; Bhattacharya S; Deruiter J; Clark CR; Suppiramaniam V; Dhanasekaran M

Institution: Department of Drug Discovery and Development, Auburn University, Auburn, AL 36830, USA.; Department of Drug Discovery and Development, Auburn University, Auburn, AL 36830, USA.; Department of Drug Discovery and Development, Auburn University, Auburn, AL 36830, USA.; Department of Drug Discovery and Development, Auburn University, Auburn, AL 36830, USA.; Department of Drug Discovery and Development, Auburn University, Auburn, AL 36830, USA.; Department of Drug Discovery and Development, Auburn University, Auburn, AL 36830, USA.; Department of Drug Discovery and Development, Auburn University, Auburn, AL 36830, USA. Electronic address: dhanamu@auburn.edu.

Language: English

Abstract: The birth of the twenty first century has provoked a substantial rise in the use of designer drugs, such as synthetic cathinones, because of a decrease in the availability and purity of other drugs of abuse. The khat plant or Catha edulis, contains cathinone, the parent compound. Synthetic cathinones are sold under the name "bath salts" as a ploy to circumvent legislation from banning their use. Constant modification of the chemical structure by covert laboratories allows manufacturers to stay one step ahead of the legal process. Currently, the widespread distribution of "bath salts" has negative consequences for law enforcement officials and public health resources. Comparable mechanisms of action, between the synthetic cathinones and amphetamine, cocaine, and MDMA are attributed to the similarities in their chemical structures. Synthetic cathinone's potent stimulatory effects, coupled with their high abuse potential, and propensity for addiction demands additional pharmacological and toxicological evaluations for these existing and new designer drugs of abuse. If these drugs are designed carefully, they might also have a significant therapeutic value.

Country of Publication: Netherlands

CAS Registry Number: 0 (Alkaloids); 0 (Central Nervous System Stimulants); 0 (Designer Drugs); 540EI4406J (cathinone)

Publication Type: Journal Article; Review

Subject Headings: "Alkaloids/ch [Chemistry]"
"*Alkaloids/pd [Pharmacology]"
Animals
Catha
"Central Nervous System Stimulants/ch [Chemistry]"
"*Central Nervous System Stimulants/pd [Pharmacology]"
"*Designer Drugs/pd [Pharmacology]"
Humans
"Substance-Related Disorders/ep [Epidemiology]"

Source: MEDLINE

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

42. Characteristics of patients admitted to the intensive care unit following self-poisoning and their impact on resource utilisation.

Citation: Irish Journal of Medical Science, September 2014, vol./is. 183/3(391-5), 0021-1265;1863-4362 (2014 Sep)

Author(s): McMahon A; Brohan J; Donnelly M; Fitzpatrick GJ

Institution: Department of Anaesthesia Critical Care and Pain Medicine, The Adelaide and Meath Hospital Dublin, Incorporating the National Childrens Hospital, Tallaght, Dublin 24, Ireland.

Language: English

Abstract: BACKGROUND: Self-poisoning accounts for up to 10 % of hospital admissions, some of whom require admission to ICU. Few studies have looked at the epidemiology of these patients in an Irish setting.AIMS: To quantify the proportion of ICU admissions attributable to self-poisoning, to examine the characteristics and outcome of these patients, and to assess their ICU resource utilisation.METHODS: Retrospective review of ICU admissions from 2006 to 2010. Data were collected on patient age, sex, admission diagnosis, substances involved, APACHE II score, length of stay, organ support, and outcome.RESULTS: There were 80 admissions to ICU following self-poisoning accounting for 3.8 % of ICU admissions and 13 % of all hospital admissions for self-poisoning. M:F ratio was 0.9:1. Mean age 35 (range 16-75), APACHE II score 14 (2-36). Commonest substances involved were benzodiazepines, opioids, tricycle antidepressants. Median ICU stay was 2 days (IQR 0.96-4.5). 84 % of patients were ventilated, 27.5 % required inotropic support, 14 % renal replacement therapy. When opioids were involved requirement for inotropes and CRRT were higher. ICU mortality was 6.3 %. These patients consumed 280 bed days.CONCLUSION: Self-poisoning accounted for 3.8 % of ICU admissions. Patients tend to require a short period of ventilation, with a minority requiring additional organ support. The cost of ICU care is calculated based on previously published methodology to be <euro>7,717 per patient. Extrapolated nationally the annual cost for ICU care for self-poisoning is estimated to be in the order of <euro>5 m.

Country of Publication: Ireland

Publication Type: Journal Article

Subject Headings:
Adult
Aged
Cause of Death
*Cost of Illness
"Critical Care/ec [Economics]"
"Drug Overdose/ec [Economics]"
"*Drug Overdose/ep [Epidemiology]"
Female
"Health Resources/ut [Utilization]"
"Hospitalization/ec [Economics]"
"*Hospitalization/sn [Statistics and Numerical Data]"
Humans
"*Intensive Care Units/ec [Economics]"
"Intensive Care Units/sn [Statistics and Numerical Data]"
"Ireland/ep [Epidemiology]"
Male
Middle Aged
"Poisoning/ec [Economics]"
"Poisoning/ep [Epidemiology]"
Retrospective Studies
"Self-Injurious Behavior/ec [Economics]"
"*Self-Injurious Behavior/ep [Epidemiology]"

Source: MEDLINE

43. Impact of tobacco control policy on quitting and nicotine dependence among women in five European countries.

Citation: Tobacco Control, March 2014, vol./is. 23/2(173-7), 0964-4563;1468-3318 (2014 Mar)

Author(s): Allen JA; Gritz ER; Xiao H; Rubenstein R; Kralikova E; Haglund M; Heck J; Niaura R; Vallone DM; WELAS Team*

Institution: Public Health Policy Research, RTI International, , Research Triangle Park, North Carolina, USA.

Language: English

Abstract: OBJECTIVE: To describe differences in and factors associated with former smoking and nicotine dependence among women in Ireland, Sweden, France, Italy and the Czech Republic.METHODS: A cross-sectional, random digit dial telephone survey of 5000 women, aged 18 years and older, conducted in 2008. Analyses were conducted using logistic regression models.RESULTS: Respondents from Ireland and Sweden had statistically significantly higher odds of having quit smoking within the 5 years before survey administration compared with respondents from the Czech Republic. Current smokers from Ireland, Sweden, France and Italy are more nicotine dependent than those from the Czech Republic.CONCLUSIONS: Respondents from countries with stronger tobacco control policies were more likely to have quit smoking compared with those living in the Czech Republic. However, respondents in countries with some of the strongest policies (Ireland, Sweden, France and Italy) had higher odds of smoking within 30 min of waking, an established indicator of nicotine dependence. More research in this area is warranted, but this study suggests that now that the Czech Republic is beginning to implement strong tobacco control policy, they will probably achieve a rapid decline in population-level smoking. Ireland, Sweden, France, Italy and other countries with established, strong tobacco control policies would do well to consider what additional programmes they can put in place to help their highly nicotine-dependent population of smokers successfully quit.

Country of Publication: England

CAS Registry Number: 54-11-5 (Nicotine)

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

Subject Headings:
Adolescent
Adult
Aged
Cross-Sectional Studies
Data Collection
"Europe/ep [Epidemiology]"
Female
Humans
Logistic Models
Middle Aged
"*Nicotine/ad [Administration and Dosage]"
*Public Health
*Public Policy
"*Smoking/ep [Epidemiology]"
"Smoking Cessation/sn [Statistics and Numerical Data]"
*Smoking Cessation
"*Tobacco Use Disorder/ep [Epidemiology]"
Women
Young Adult

Source: MEDLINE

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

44. Recovery and identification of bacterial DNA from illicit drugs.

Citation: Forensic Science International, February 2014, vol./is. 235/(78-85), 0379-0738;1872-6283 (2014 Feb)

Author(s): Cho KT; Richardson MM; Kirkbride KP; McNevin D; Nelson M; Pianca D; Roffey P; Gahan ME

Institution: National Centre for Forensic Studies, University of Canberra, Bruce, ACT 2601, Australia.; Forensics, Australian Federal Police, Unwin Place, Weston Creek, ACT 2611, Australia.; Forensics, Australian Federal Police, Unwin Place, Weston Creek, ACT 2611, Australia; School of Chemical and Physical Sciences, Flinders University, Bedford Park, South Australia, Australia. Electronic address: Paul.kirkbride@flinders.edu.au.; National Centre for Forensic Studies, University of Canberra, Bruce, ACT 2601, Australia. Electronic address: dennis.mcnevin@canberra.edu.au.; National Centre for Forensic Studies, University of Canberra, Bruce, ACT 2601, Australia. Electronic address: michelle.nelson@canberra.edu.au.; ACT Government Analytical Laboratory, Weston Creek, ACT 2611, Australia. Electronic address: dennis.pianca@act.gov.au.; National Centre for Forensic Studies, University of Canberra, Bruce, ACT 2601, Australia; Forensics, Australian Federal Police, Unwin Place, Weston Creek, ACT 2611, Australia. Electronic address: paul.roffey@afp.gov.au.; National Centre for Forensic Studies, University of Canberra, Bruce, ACT 2601, Australia. Electronic address: michelle.gahan@canberra.edu.au.

Language: English

Abstract: Bacterial infections, including Bacillus anthracis (anthrax), are a common risk associated with illicit drug use, particularly among injecting drug users. There is, therefore, an urgent need to survey illicit drugs used for injection for the presence of bacteria and provide valuable information to health and forensic authorities. The objectives of this study were to develop a method for the extraction of bacterial DNA from illicit drugs and conduct a metagenomic survey of heroin and methamphetamine seized in the Australian Capital Territory during 2002-2011 for the presence of pathogens. Trends or patterns in drug contamination and their health implications for injecting drug users were also investigated. Methods based on the ChargeSwitch()gDNA mini kit (Invitrogen), QIAamp DNA extraction mini kit (QIAGEN) with and without bead-beating, and an organic phenol/chloroform extraction with ethanol precipitation were assessed for the recovery efficiency of both free and cellular bacterial DNA. Bacteria were identified using polymerase chain reaction and electrospray ionization-mass spectrometry (PCR/ESI-MS). An isopropanol pre-wash to remove traces of the drug and diluents, followed by a modified ChargeSwitch() method, was found to efficiently lyse cells and extract free and cellular DNA from Gram-positive and Gram-negative bacteria in heroin and methamphetamine which could then be identified by PCR/ESI-MS. Analysis of 12 heroin samples revealed the presence of DNA from species of Comamonas, Weissella, Bacillus, Streptococcus and Arthrobacter. No organisms were detected in the nine methamphetamine samples analysed. This study develops a method to extract and identify Gram-positive and Gram-negative bacteria from illicit drugs and demonstrates the presence of a range of bacterial pathogens in seized drug samples. These results will prove valuable for future work investigating trends or patterns in drug contamination and their health implications for injecting drug users as well as enabling forensic links between seizures to be examined. Copyright 2014 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (DNA, Bacterial); 0 (Narcotics); 0 (Street Drugs); 44RAL3456C (Methamphetamine); 70D95007SX (Heroin)

Publication Type: Journal Article

Subject Headings:
"*DNA Bacterial/ip [Isolation and Purification]"
*Drug Contamination
"Gram-Negative Bacteria/ge [Genetics]"
"*Gram-Negative Bacteria/ip [Isolation and Purification]"
"Gram-Positive Bacteria/ge [Genetics]"
"*Gram-Positive Bacteria/ip [Isolation and Purification]"

"Heroin/ch [Chemistry]"
Humans
"Methamphetamine/ch [Chemistry]"
"*Narcotics/ch [Chemistry]"
Polymerase Chain Reaction
Spectrometry Mass Electrospray Ionization
"*Street Drugs/ch [Chemistry]"
Substance Abuse Intravenous

Source: MEDLINE

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

45. Psychosocial and sexual healthcare needs in men selling sex in Glasgow: a retrospective case note review.

Citation: Sexually Transmitted Infections, September 2014, vol./is. 90/6(504), 1368-4973;1472-3263 (2014 Sep)

Author(s): Fraser G; McAdams R; Heng J; Macpherson A

Institution: Department of Sexual Health and HIV, Sandyford Initiative, NHS Greater Glasgow and Clyde, Glasgow, UK.; North West Sector Health Improvement Team, NHS Greater Glasgow and Clyde, Gartnavel General Hospital, Glasgow, UK.; NHS Greater Glasgow and Clyde, Glasgow, UK.; Research and Training Department, NHS Greater Glasgow and Clyde, Sandyford Initiative, Glasgow, UK.

Language: English

Country of Publication: England

Publication Type: Letter

Subject Headings:
Adult
"Alcoholism/ep [Epidemiology]"
"Chlamydia Infections/ep [Epidemiology]"
Cohort Studies
"*Condoms/ut [Utilization]"
"Gonorrhea/ep [Epidemiology]"
"HIV Infections/ep [Epidemiology]"
*Health Services Needs and Demand
"Hepatitis B/ep [Epidemiology]"
"Hepatitis C/ep [Epidemiology]"
"Herpes Simplex/ep [Epidemiology]"
"Homeless Persons/sn [Statistics and Numerical Data]"
"*Homosexuality Male/sn [Statistics and Numerical Data]"
Humans
Male
"Pharyngitis/ep [Epidemiology]"
"Rape/sn [Statistics and Numerical Data]"
"Rectal Diseases/ep [Epidemiology]"
Retrospective Studies
"Scotland/ep [Epidemiology]"
"Sex Workers/px [Psychology]"
"*Sex Workers/sn [Statistics and Numerical Data]"
"Sexual Behavior/sn [Statistics and Numerical Data]"
"*Sexually Transmitted Diseases/ep [Epidemiology]"
"*Substance-Related Disorders/ep [Epidemiology]"

Source: MEDLINE

Full Text: Available from *Highwire Press* in *Sexually transmitted infections*

46. Development and validation of a single LC-MS/MS assay following SPE for simultaneous hair analysis of amphetamines, opiates, cocaine and metabolites.

Citation: Forensic Science International, January 2014, vol./is. 234/(132-8), 0379-0738;1872-6283 (2014 Jan)

Author(s): Imbert L; Dulaurent S; Mercerolle M; Morichon J; Lachatre G; Gaulier JM

Institution: Department of Pharmacology and Toxicology, University Hospital, 2, Avenue Martin-Luther-King, 87042 Limoges Cedex, France. Electronic address: laurent.imbert@unilim.fr.; Department of Pharmacology and Toxicology, University Hospital, 2, Avenue Martin-Luther-King, 87042 Limoges Cedex, France. Electronic address: sylvain.dulaurent@unilim.fr.; Department of Pharmacology and Toxicology, University Hospital, 2, Avenue Martin-Luther-King, 87042 Limoges Cedex, France. Electronic address: mm@shimadzu.fr.; Department of Pharmacology and Toxicology, University Hospital, 2, Avenue Martin-Luther-King, 87042 Limoges Cedex, France. Electronic address: CG@chu-limoges.fr.; Department of Pharmacology and Toxicology, University Hospital, 2, Avenue Martin-Luther-King, 87042 Limoges Cedex, France; Laboratory of Toxicology, Faculty of Pharmacy, 2 rue Docteur Raymond Marcland, 87000 Limoges, France. Electronic address: gerard.lachatre@unilim.fr.; Department of Pharmacology and Toxicology, University Hospital, 2, Avenue Martin-Luther-King, 87042 Limoges Cedex, France. Electronic address: jm-gaulier@unilim.fr.

Language: English

Abstract: The two major challenges in hair analysis are the limited amount of samples usually available and the low targeted concentrations. To overcome these limitations, a liquid chromatography-electrospray-tandem mass spectrometry method (LC-ESI-MS/MS) allowing the simultaneous analysis of 17 amphetamines (amphetamine, BDB, m-CPP, dexfenfluramine, DOB, DOM, ephedrine, MBDB, MDA, MDEA, MDMA, methamphetamine, methylphenidate, 4-MTA, norephedrine, norfenfluramine and PMA), 5 opiates (morphine, codeine, heroin, ethylmorphine, and 6AM), cocaine and 5 metabolites [ecgonine methyl ester (EME), benzoylecgonine (BZE), anhydroecgonine methyl ester (AME), cocaethylene, and norcocaine] has been developed. The validation procedure included linearity, intra-day and inter-day variability and accuracy for 5 days (5 replicates at 3 concentration levels). Proficiency studies were used to check the accuracy of the method. As a result, all amphetamines, opiates and cocaine derivatives were satisfactory identified by 2 MRM transitions in 15 min. Calibration curves were performed by a quadratic 1/X weighted regression. The calibration model fits from 0.05 to 10 ng/mg. The limits of detection (LODs) range between 0.005 and 0.030 ng/mg. Precision has been checked by intra-day and inter-day RSD, and associated relative bias, which were lower than 25% for the limits of quantifications (LOQs) and lower than 20% for the other levels tested. This method was routinely applied to hair samples: two positive results of adult drug addicts are presented.

Country of Publication: Ireland

CAS Registry Number: 0 (Amphetamines); 0 (Analgesics, Opioid); 0 (Narcotics); 18717-72-1 (norcocaine); 43021-26-7 (anhydroecgonine methyl ester); 5353I8I6YS (benzoylecgonine); FJO3071W5Y (cocaethylene); I5Y540LHVR (Cocaine); Y35FJB3QBJ (ecgonine methyl ester)

Publication Type: Journal Article; Validation Studies

Subject Headings: "*Amphetamines/an [Analysis]"
"*Analgesics Opioid/an [Analysis]"
Chromatography Liquid
"Cocaine/aa [Analogs and Derivatives]"
"*Cocaine/an [Analysis]"
"Forensic Toxicology/mt [Methods]"
"*Hair/ch [Chemistry]"
Humans
Limit of Detection

Male
"*Narcotics/an [Analysis]"
Spectrometry Mass Electrospray Ionization
"Substance Abuse Detection/mt [Methods]"
Tandem Mass Spectrometry

Source: MEDLINE

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

47. Free fatty acids as markers of death from hypothermia.

Citation: Forensic Science International, January 2014, vol./is. 234/(79-85), 0379-0738;1872-6283 (2014 Jan)

Author(s): Banka K; Teresinski G; Buszewicz G

Institution: Chair and Department of Forensic Medicine, Medical University of Lublin, 20-090 Lublin, Poland. Electronic address: krzysztofbanka@wp.pl.; Chair and Department of Forensic Medicine, Medical University of Lublin, 20-090 Lublin, Poland.; Chair and Department of Forensic Medicine, Medical University of Lublin, 20-090 Lublin, Poland.

Language: English

Abstract: The possibilities of using morphological markers of fatal hypothermia are limited; therefore, other diagnostic criteria of deaths from hypothermia are being researched. The initiation of protective mechanisms against adverse effects of low temperatures results in activation of hormonal systems and development of characteristic biochemical changes that can be impaired by alcohol intoxication. The aim of the study was to assess the usefulness of determinations of the profile of free fatty acid concentrations as potential markers of hypothermia-related deaths, particularly in intoxicated victims. The study group consisted of blood samples collected during autopsies of 23 victims of hypothermia. The control group included blood samples collected from 34 victims of sudden, violent deaths at the scene of an incident (hangings and traffic accidents) and 10 victims who died because of post-traumatic subdural hematomas with prolonged agony. The study and control groups were divided into three subgroups according to blood alcohol concentrations: 0.0-0.99; 1.0-2.99 and >3.0. Statistical analysis in the individual subgroups demonstrated significant increases in concentrations of palmitic, stearic and oleic acids ($P<0.05$), independent of blood ethanol concentration. Palmitic, stearic and oleic acids can be considered the potential markers of fatal hypothermia, including the cases of intoxicated individuals.

Country of Publication: Ireland

CAS Registry Number: 0 (Biological Markers); 0 (Central Nervous System Depressants); 0 (Fatty Acids, Nonesterified); 3K9958V90M (Ethanol)

Publication Type: Journal Article

Subject Headings: "Alcoholic Intoxication/bl [Blood]"
"Biological Markers/bl [Blood]"
Case-Control Studies
"Central Nervous System Depressants/bl [Blood]"
"Ethanol/bl [Blood]"
"*Fatty Acids Nonesterified/bl [Blood]"
Forensic Pathology
Humans
"*Hypothermia/bl [Blood]"
"*Hypothermia/di [Diagnosis]"

Source: MEDLINE

Full Text: Available from *Elsevier* in *Forensic Science International*

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

48. Pre-analytical and analytical variation of drug determination in segmented hair using ultra-performance liquid chromatography-tandem mass spectrometry.

Citation: Forensic Science International, January 2014, vol./is. 234/(16-21), 0379-0738;1872-6283 (2014 Jan)

Author(s): Nielsen MK; Johansen SS; Linnet K

Institution: Section of Forensic Chemistry, Department of Forensic Medicine, Faculty of Health Sciences, University of Copenhagen, Frederik V' vej 11, DK-2100, Denmark. Electronic address: marie.nielsen@sund.ku.dk.; Section of Forensic Chemistry, Department of Forensic Medicine, Faculty of Health Sciences, University of Copenhagen, Frederik V' vej 11, DK-2100, Denmark.; Section of Forensic Chemistry, Department of Forensic Medicine, Faculty of Health Sciences, University of Copenhagen, Frederik V' vej 11, DK-2100, Denmark.

Language: English

Abstract: Assessment of total uncertainty of analytical methods for the measurements of drugs in human hair has mainly been derived from the analytical variation. However, in hair analysis several other sources of uncertainty will contribute to the total uncertainty. Particularly, in segmental hair analysis pre-analytical variations associated with the sampling and segmentation may be significant factors in the assessment of the total uncertainty budget. The aim of this study was to develop and validate a method for the analysis of 31 common drugs in hair using ultra-performance liquid chromatography-tandem mass spectrometry (UHPLC-MS/MS) with focus on the assessment of both the analytical and pre-analytical sampling variations. The validated method was specific, accurate (80-120%), and precise (CV<20%) across a wide linear concentration range from 0.025-25 ng/mg for most compounds. The analytical variation was estimated to be less than 15% for almost all compounds. The method was successfully applied to 25 segmented hair specimens from deceased drug addicts showing a broad pattern of poly-drug use. The pre-analytical sampling variation was estimated from the genuine duplicate measurements of two bundles of hair collected from each subject after subtraction of the analytical component. For the most frequently detected analytes, the pre-analytical variation was estimated to be 26-69%. Thus, the pre-analytical variation was 3-7 folds larger than the analytical variation (7-13%) and hence the dominant component in the total variation (29-70%). The present study demonstrated the importance of including the pre-analytical variation in the assessment of the total uncertainty budget and in the setting of the 95%-uncertainty interval (+2CVT). Excluding the pre-analytical sampling variation could significantly affect the interpretation of results from segmental hair analysis.

Country of Publication: Ireland

CAS Registry Number: 0 (Narcotics); 0 (Pharmaceutical Preparations)

Publication Type: Journal Article; Validation Studies

Subject Headings:
"Chromatography Liquid/mt [Methods]"
Drug Users
"Forensic Toxicology/mt [Methods]"
"*Hair/ch [Chemistry]"
Humans
"*Narcotics/an [Analysis]"
"*Pharmaceutical Preparations/an [Analysis]"
"Substance Abuse Detection/mt [Methods]"
Tandem Mass Spectrometry

Source: MEDLINE

Full Text: Available from *Elsevier* in *Forensic Science International*

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

49. Preparing to approach or avoid alcohol: EEG correlates, and acute alcohol effects.

Citation: Neuroscience Letters, January 2014, vol./is. 559/(199-204), 0304-3940;1872-7972 (2014 Jan 24)

Author(s): Korucuoglu O; Gladwin TE; Wiers RW

Institution: Addiction, Development and Psychopathology (ADAPT)-Lab, Department of Psychology, University of Amsterdam, Weesperplein 4, 1018 XA Amsterdam, The Netherlands. Electronic address: o.korucuoglu@uva.nl.; Addiction, Development and Psychopathology (ADAPT)-Lab, Department of Psychology, University of Amsterdam, Weesperplein 4, 1018 XA Amsterdam, The Netherlands.; Addiction, Development and Psychopathology (ADAPT)-Lab, Department of Psychology, University of Amsterdam, Weesperplein 4, 1018 XA Amsterdam, The Netherlands.

Language: English

Abstract: Recently an approach-bias for alcohol has been described as an important cognitive motivational process in the etiology of alcohol use problems. In the approach-bias, perception and action are inextricably linked and stimulus response associations are central to this bias: performance improves when task instructions are congruent with a pre-existing stimulus-response association. These pre-existing response associations could potentially allow advance response preparation and execution. The present study aimed at investigating the effect of the alcohol approach bias on response preparation by means of event-related desynchronization in the beta band (beta-ERD) of the EEG signal and the effect of acute alcohol in the approach bias in response to alcohol cues. Subjects (18 social drinkers) performed an adapted alcohol-Approach Avoidance Task, in which a preparatory period was provided between alcohol/soft drink cues and approach/avoid responses. Subjects were tested both in a placebo and in an alcohol condition (counterbalanced). Posterior beta-ERD was found to increase during preparation for alcohol-approach trials. The beta-ERD in the congruent block increased following alcohol administration. These results suggest that advance response preparation may play a role in the alcohol approach bias and that acute alcohol facilitates response preparatory processes for approach alcohol trials. Future EEG studies using the adapted AAT may help understanding approach biases in addiction.

Country of Publication: Ireland

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

Subject Headings:
Adolescent
Adult
"*Alcohol Drinking/pp [Physiopathology]"
"Alcohol Drinking/px [Psychology]"
*Cues
Double-Blind Method
"*Electroencephalography/mt [Methods]"
"Electroencephalography/px [Psychology]"
Female
Humans
Male
"*Photic Stimulation/mt [Methods]"
"*Reaction Time/ph [Physiology]"
Young Adult

Source: MEDLINE

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

50. Stress and withdrawal from d-amphetamine alter 5-HT2A receptor mRNA expression in the prefrontal cortex.

Citation: Neuroscience Letters, January 2014, vol./is. 559/(44-9), 0304-3940;1872-7972 (2014 Jan 24)

Author(s): Murray RC; Hebbard JC; Logan AS; Vanchipurakel GA; Gilbert YE; Horner KA

Institution: Division of Basic Sciences, Mercer University School of Medicine, Macon, GA, USA. Electronic address: murray_rc@mercer.edu.; Division of Basic Sciences, Mercer University School of Medicine, Macon, GA, USA. Electronic address: hebbard_j@med.mercer.edu.; Division of Basic Sciences, Mercer University School of Medicine, Macon, GA, USA. Electronic address: anna.s.logan@gmail.com.; Division of Basic Sciences, Mercer University School of Medicine, Macon, GA, USA. Electronic address: golda.vanchipurakel@live.mercer.edu.; Division of Basic Sciences, Mercer University School of Medicine, Macon, GA, USA. Electronic address: yamiece.e.gilbert@gmail.com.; Division of Basic Sciences, Mercer University School of Medicine, Macon, GA, USA. Electronic address: horner_ka@mercer.edu.

Language: English

Abstract: Psychostimulant withdrawal results in emotional, behavioral, and cognitive impairments, which may be exacerbated by stress. However, little is known about the neurochemical changes that occur when these two conditions are experienced concomitantly. 5-HT2A receptor (5-HT2AR) mRNA expression in the prefrontal cortex (PFC) is diminished following withdrawal from d-amphetamine (AMPH) and may underlie the emotional and cognitive impairments observed in psychostimulant withdrawal, but whether stress affects 5-HT2AR mRNA expression during psychostimulant withdrawal is unknown. The goal of this study was to examine the impact of forced swim test (FST) exposure during AMPH withdrawal on 5-HT2AR mRNA expression in PFC. Animals were treated 3 times a day for 4 days with escalating doses of AMPH (1-10mg/kg) and 24h or 4 days after the final injection, animals were subjected to FST. At 24h of withdrawal, AMPH-treated animals showed greater immobility in FST and at 4 days of withdrawal, AMPH-treated animals did not show immobility. At 24h of withdrawal, animals showed lower 5-HT2AR mRNA expression in the PFC relative to saline-treated animals, and exposure to FST did not further decrease expression in these animals. At 4 days of withdrawal, AMPH-treated animals showed greater 5-HT2AR mRNA expression relative to saline-treated animals in the PFC, an effect that was diminished by exposure to FST. These data indicate that stress and short-term AMPH withdrawal affect prefrontal 5-HT2AR mRNA expression to a similar degree, and stress experienced during long-term AMPH withdrawal can diminish the recovery of 5-HT2AR mRNA expression. Together, these data suggest that exposure to stress during extended AMPH withdrawal could prolong withdrawal-induced, 5-HT2AR mRNA expression which could be related to 5-HT2AR mediated deficits.

Country of Publication: Ireland

CAS Registry Number: 0 (RNA, Messenger); 0 (Receptor, Serotonin, 5-HT2A); TZ47U051FI (Dextroamphetamine)

Publication Type: Journal Article

Subject Headings:
"Amphetamine-Related Disorders/me [Metabolism]"
"Amphetamine-Related Disorders/px [Psychology]"
Animals
"*Dextroamphetamine/ae [Adverse Effects]"
Gene Expression Regulation
Male
"*Prefrontal Cortex/me [Metabolism]"
"*RNA Messenger/bi [Biosynthesis]"
Rats
Rats Sprague-Dawley
"*Receptor Serotonin 5-HT2A/bi [Biosynthesis]"
"*Stress Psychological/me [Metabolism]"
"Stress Psychological/px [Psychology]"

"*Substance Withdrawal Syndrome/me [Metabolism]"
"Substance Withdrawal Syndrome/px [Psychology]"

Source: MEDLINE

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

51. L-stepholidine, a natural dopamine receptor D1 agonist and D2 antagonist, inhibits heroin-induced reinstatement.

Citation: Neuroscience Letters, January 2014, vol./is. 559/(67-71), 0304-3940;1872-7972 (2014 Jan 24)

Author(s): Ma B; Yue K; Chen L; Tian X; Ru Q; Gan Y; Wang D; Jin G; Li C

Institution: Wuhan Institutes of Biomedical Sciences, Jianghan University, Wuhan 430056, China.; Wuhan Institutes of Biomedical Sciences, Jianghan University, Wuhan 430056, China.; Wuhan Institutes of Biomedical Sciences, Jianghan University, Wuhan 430056, China.; Wuhan Institutes of Biomedical Sciences, Jianghan University, Wuhan 430056, China.; Wuhan Institutes of Biomedical Sciences, Jianghan University, Wuhan 430056, China.; Drug Prevention and Education Center, Hubei Public Security Bureau, Wuhan 430070, China.; Drug Prevention and Education Center, Hubei Public Security Bureau, Wuhan 430070, China.; Wuhan Institutes of Biomedical Sciences, Jianghan University, Wuhan 430056, China; Shanghai Institute of Materia Medica, Chinese Academy of Sciences, Shanghai 201213, China.; Wuhan Institutes of Biomedical Sciences, Jianghan University, Wuhan 430056, China. Electronic address: licy.whibs.corresp@gmail.com.

Language: English

Abstract: L-Stepholidine (l-SPD), an alkaloid extract of the Chinese herb Stephania intermedia, is the first compound known to exhibit mixed dopamine D1 receptor agonist/D2 antagonist properties and is a potential medication for the treatment of opiate addiction. The aim of the present study was to investigate the effects of pretreatment with L-SPD on heroin-seeking behavior induced by heroin priming. Male Sprague-Dawley rats were trained to self-administer heroin (0.05mg/kg per infusion) under a fixed ratio 1 schedule for 12 consecutive days and nose-poke responding was extinguished for 12 days, after which reinstatement of drug seeking was induced by heroin priming. Pretreatment with L-SPD (2.5, 5.0 and 10.0mg/kg, i.p.) inhibited the heroin-induced reinstatement of heroin-seeking behavior. Importantly, L-SPD did not affect locomotion, indicating that the observed effects of L-SPD on reinstatement are not the result of motor impairments. The present data suggested that l-SPD inhibits heroin-induced reinstatement and its potential for the treatment of heroin relapse.

Country of Publication: Ireland

CAS Registry Number: 0 (Dopamine Agonists); 0 (Dopamine Antagonists); 0 (Receptors, Dopamine D1); 0 (Receptors, Dopamine D2); 0I8Y3P32UF (Berberine); 16562-13-3 (stepholidine); 70D95007SX (Heroin)

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

Subject Headings: Animals
"*Berberine/aa [Analogs and Derivatives]"
"Berberine/pd [Pharmacology]"
"Dopamine Agonists/pd [Pharmacology]"
"Dopamine Antagonists/pd [Pharmacology]"
"*Extinction Psychological/de [Drug Effects]"
"Extinction Psychological/ph [Physiology]"
"*Heroin/ad [Administration and Dosage]"
Male
Rats
Rats Sprague-Dawley
"*Receptors Dopamine D1/ag [Agonists]"
"Receptors Dopamine D1/ph [Physiology]"
"*Receptors Dopamine D2/ai [Antagonists and Inhibitors]"

"Receptors Dopamine D2/ph [Physiology]"
*Reinforcement (Psychology)
Self Administration

Source: MEDLINE

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

52. Industry actors, think tanks, and alcohol policy in the United kingdom.

Citation: American Journal of Public Health, August 2014, vol./is. 104/8(1363-9), 0090-0036;1541-0048 (2014 Aug)

Author(s): Hawkins B; McCambridge J

Institution: Benjamin Hawkins and Jim McCambridge are with the London School of Hygiene and Tropical Medicine, London, England.

Language: English

Abstract: Corporate actors seek to influence alcohol policies through various means, including attempts to shape the evidential content of policy debates. In this case study, we examined how SABMiller engaged the think tank Demos to produce reports on binge drinking, which were heavily promoted among policymakers at crucial stages in the development of the UK government's 2012 alcohol strategy. One key report coincided with other SABMiller-funded publications, advocating measures to enhance parenting as an alternative to minimum unit pricing. In this instance, the perceived independence of an influential think tank was used to promote industry interests in tactics similar to those of transnational tobacco corporations. This approach is in keeping with other alcohol industry efforts to marginalize the peer-reviewed literature.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: "Alcoholic Beverages/ec [Economics]"
*Alcoholic Beverages
"Binge Drinking/pc [Prevention and Control]"
*Food Industry
Great Britain
*Health Policy
Humans
Legislation as Topic
Lobbying
Policy Making

Source: MEDLINE

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

53. Clinical differences between cocaine-induced psychotic disorder and psychotic symptoms in cocaine-dependent patients.

Citation: Psychiatry Research, May 2014, vol./is. 216/3(398-403), 0165-1781;1872-7123 (2014 May 30)

Author(s): Roncero C; Comin M; Daigre C; Grau-Lopez L; Martinez-Luna N; Eiroa-Orosa FJ; Barral C; Torrens M; Casas M

Institution: Outpatient Drug Clinic (CAS) Vall Hebron, Psychiatry Department, Vall Hebron Hospital-ASPB, Universidad Autonoma de Barcelona, CIBERSAM, Spain; Department of Psychiatry and Legal Medicine, Universidad Autonoma de Barcelona, Spain; Department of Psychiatry, Hospital Universitari Vall d'Hebron, CIBERSAM, Universitad

Autonoma de Barcelona, Spain. Electronic address: croncero@vhebron.net.; Outpatient Drug Clinic (CAS) Vall Hebron, Psychiatry Department, Vall Hebron Hospital-ASPB, Universidad Autonoma de Barcelona, CIBERSAM, Spain.; Outpatient Drug Clinic (CAS) Vall Hebron, Psychiatry Department, Vall Hebron Hospital-ASPB, Universidad Autonoma de Barcelona, CIBERSAM, Spain; Department of Psychiatry and Legal Medicine, Universidad Autonoma de Barcelona, Spain.; Outpatient Drug Clinic (CAS) Vall Hebron, Psychiatry Department, Vall Hebron Hospital-ASPB, Universidad Autonoma de Barcelona, CIBERSAM, Spain; Department of Psychiatry and Legal Medicine, Universidad Autonoma de Barcelona, Spain; Department of Psychiatry, Hospital Universitari Vall d'Hebron, CIBERSAM, Universitad Autonoma de Barcelona, Spain.; Outpatient Drug Clinic (CAS) Vall Hebron, Psychiatry Department, Vall Hebron Hospital-ASPB, Universidad Autonoma de Barcelona, CIBERSAM, Spain; Department of Psychiatry, Hospital Universitari Vall d'Hebron, CIBERSAM, Universitad Autonoma de Barcelona, Spain.; Department of Psychiatry and Legal Medicine, Universidad Autonoma de Barcelona, Spain.; Outpatient Drug Clinic (CAS) Vall Hebron, Psychiatry Department, Vall Hebron Hospital-ASPB, Universidad Autonoma de Barcelona, CIBERSAM, Spain; Department of Psychiatry, Hospital Universitari Vall d'Hebron, CIBERSAM, Universitad Autonoma de Barcelona, Spain.; Department of Psychiatry and Legal Medicine, Universidad Autonoma de Barcelona, Spain; Addiction Research Group IMIM-Hospital del Mar, Barcelona, Spain.; Department of Psychiatry and Legal Medicine, Universidad Autonoma de Barcelona, Spain; Department of Psychiatry, Hospital Universitari Vall d'Hebron, CIBERSAM, Universitad Autonoma de Barcelona, Spain.

Language: English

Abstract: The aim of this study is to compare the clinical characteristics of three groups of patients in treatment for cocaine dependence: patients without any psychotic symptoms (NS), patients with transient psychotic symptoms (PS) and patients with cocaine-induced psychotic disorder (CIPD). An observational and retrospective study of 150 cocaine-dependent patients undergoing treatment in the Drug Unit of the Psychiatry Department of University Hospital Vall d'Hebron in Barcelona (Spain) using these three groups, NS, PS and CIPD, was performed. All patients were evaluated with the PRISM interview. ANOVA, chi2 tests and multivariate multinomial regression analysis were used to perform statistical analyses. Seven patients with a primary psychotic disorder were discharged. Forty-six patients (32.1%) did not report any psychotic symptoms. Ninety-seven patients (67.9%) presented with a history of any cocaine-induced psychotic symptom and were considered as the cocaine-induced psychotic (CIP) group. Among them, 39 (27.3%) were included in the PS group and 58 (40.6%) were included in the CIPD group. A history of imprisonment was found significantly more frequently in the PS group than in the NS group. The distribution of age at onset of dependence, lifetime cannabis abuse or dependence and imprisonment were significantly different between the NS and CIPD groups. We conclude that in cocaine-dependent patients, clinicians should be advised about the risk of development of psychotic symptoms. The presence of some psychotic symptoms could increase the potential risks of disturbing behaviours.

Country of Publication: Ireland

CAS Registry Number: I5Y540LHVR (Cocaine)

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

Subject Headings:
Adult
Age Distribution
Age of Onset
"*Cocaine/ae [Adverse Effects]"
"*Cocaine-Related Disorders/co [Complications]"
"*Cocaine-Related Disorders/px [Psychology]"
Cross-Sectional Studies
Female
Humans
Interviews as Topic
Male

Marijuana Abuse
"Psychotic Disorders/cl [Classification]"
"Psychotic Disorders/co [Complications]"
"*Psychotic Disorders/et [Etiology]"
"*Psychotic Disorders/px [Psychology]"
Retrospective Studies
Spain
Young Adult

Source: MEDLINE

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

54. Anxiety, depression, impulsivity and substance misuse in violent and non-violent adolescent boys in detention in China.

Citation: Psychiatry Research, May 2014, vol./is. 216/3(379-84), 0165-1781;1872-7123 (2014 May 30)

Author(s): Zhou J; Witt K; Zhang Y; Chen C; Qiu C; Cao L; Wang X

Institution: Shanghai Key Laboratory of Forensic Medicine, Institute of Forensic Science, Ministry of Justice, Shanghai 200063, China; Mental Health Institute, Second Xiangya Hospital, National Technology Institute of Psychiatry, Key Laboratory of Psychiatry and Mental Health of Hunan Province, Central South University, Number 139 Renming Road, Changsha, Hunan 410011, China.; University of Oxford, Department of Psychiatry, Warneford Hospital, Oxford OX3 7JX, UK.; Mental Health Institute, Second Xiangya Hospital, National Technology Institute of Psychiatry, Key Laboratory of Psychiatry and Mental Health of Hunan Province, Central South University, Number 139 Renming Road, Changsha, Hunan 410011, China.; Mental Health Institute, Second Xiangya Hospital, National Technology Institute of Psychiatry, Key Laboratory of Psychiatry and Mental Health of Hunan Province, Central South University, Number 139 Renming Road, Changsha, Hunan 410011, China.; Mental Health Center, West China Hospital, Sichuan University, Chengdu 610041, China.; Guangzhou Psychiatric Hospital, 36 Mingxin Road, Guangzhou 510370, China.; Mental Health Institute, Second Xiangya Hospital, National Technology Institute of Psychiatry, Key Laboratory of Psychiatry and Mental Health of Hunan Province, Central South University, Number 139 Renming Road, Changsha, Hunan 410011, China. Electronic address: xyjw6@aliyun.com.

Language: English

Abstract: The present investigation aims to identify the factors which differentiate violent from non-violent juvenile offenders, with a particular emphasis on the association between internalizing psychiatric morbidity (i.e. anxiety and depression), impulsivity, substance misuse, and violence. A total of 323 incarcerated male juvenile offenders from one of three Youth Detention Centers (YDCs) in China were recruited between August 2007 and November 2008. Interviews were conducted by trained psychiatrists using the Barratt Impulsivity Scale (BIS-11), the Screen for Child Anxiety Related Emotional Disorders (SCARED), and the Birleson Depression Self-Rating Scale (DSRS) to assess impulsivity, anxiety and depression, respectively. The Schedule for Affective Disorder and Schizophrenia for School-Age Children Present and Lifetime (K-SADS-PL) was also used to assess psychiatric diagnoses. Violent offenders had significantly higher BIS-11 total scores, and attention and nonplanning subscale scores ($p<0.05$). In the multiple logistic regression model, substance use disorders (SUD) and BIS-11 total scores independently predicted violence. Prison-based treatment services designed to reduce impulsivity and substance misuse in juvenile detention facilities should be prioritized.

Country of Publication: Ireland

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

Subject Headings: Adolescent
"Aggression/px [Psychology]"
"*Anxiety/di [Diagnosis]"
"Anxiety/px [Psychology]"

China
Demography
"*Depression/di [Diagnosis]"
"Depression/px [Psychology]"
Humans
"Impulsive Behavior/di [Diagnosis]"
"*Impulsive Behavior/px [Psychology]"
"*Juvenile Delinquency/px [Psychology]"
Logistic Models
Male
"*Mental Disorders/di [Diagnosis]"
"Mental Disorders/px [Psychology]"
"Mood Disorders/di [Diagnosis]"
"Prisoners/px [Psychology]"
Psychiatric Status Rating Scales
"Schizophrenia/di [Diagnosis]"
Self Report
"*Substance-Related Disorders/di [Diagnosis]"
"Substance-Related Disorders/px [Psychology]"
"Violence/pc [Prevention and Control]"
"*Violence/px [Psychology]"

Source: MEDLINE

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

55. Gabapentin: can it be misused?.

Citation: Journal of Psychosocial Nursing & Mental Health Services, January 2014, vol./is. 52/1(12-5), 0279-3695;0279-3695 (2014 Jan)

Author(s): Howland RH

Language: English

Abstract: Gabapentin, a gamma-aminobutyric acid analog drug, appears to be safe and efficacious for the treatment of alcohol dependence. Gabapentin is not a controlled drug, but there are anecdotal reports of its misuse and abuse as well as reports of withdrawal symptoms associated with abrupt discontinuation. The risk of gabapentin misuse is inconsistent, the magnitude of the risk is small, and the risk is not comparable to the much higher risks associated with alcohol use; benzodiazepine, opioid, and stimulant drug use; or illicit drug use. Reports of gabapentin misuse are not unique to this drug, as misuse of prescription medications not typically considered "drugs of abuse" can also occur.

Country of Publication: United States

CAS Registry Number: 0 (Amines); 0 (Controlled Substances); 0 (Cyclohexanecarboxylic Acids); 56-12-2 (gamma-Aminobutyric Acid); 6CW7F3G59X (gabapentin)

Publication Type: Journal Article; Personal Narratives

Subject Headings:
"*Amines/ae [Adverse Effects]"
"Amines/cl [Classification]"
"Controlled Substances/cl [Classification]"
"*Cyclohexanecarboxylic Acids/ae [Adverse Effects]"
"Cyclohexanecarboxylic Acids/cl [Classification]"
Female
"Great Britain/ep [Epidemiology]"
Humans
Incidence
Male
"Norway/ep [Epidemiology]"
"Prescription Drug Misuse/ae [Adverse Effects]"
"*Prescription Drug Misuse/sn [Statistics and Numerical Data]"
Risk Assessment
"Scotland/ep [Epidemiology]"

"Substance Withdrawal Syndrome/ep [Epidemiology]"
"Substance Withdrawal Syndrome/et [Etiology]"
"Substance Withdrawal Syndrome/pc [Prevention and Control]"
"Substance-Related Disorders/ep [Epidemiology]"
"*Substance-Related Disorders/et [Etiology]"
"*gamma-Aminobutyric Acid/ae [Adverse Effects]"
"gamma-Aminobutyric Acid/cl [Classification]"

Source: MEDLINE

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

56. The potential impact of increased treatment rates for alcohol dependence in the United Kingdom in 2004.

Citation: BMC Health Services Research, 2014, vol./is. 14/(53), 1472-6963;1472-6963 (2014)

Author(s): Shield KD; Rehm J; Rehm MX; Gmel G; Drummond C

Institution: Centre for Addiction and Mental Health (CAMH), 33 Russell Street, Toronto, ON M5S 2S1, Canada. Kevin.Shield@mail.utoronto.ca.

Language: English

Abstract: BACKGROUND: Alcohol consumption has been linked to a considerable burden of disease in the United Kingdom (UK), with most of this burden due to heavy drinking and Alcohol Dependence (AD). However, AD is undertreated in the UK, with only 8% of those individuals with AD being treated in England and only 6% of those individuals with AD being treated in Scotland. Thus, the objective of this paper is to quantify the deaths that would have been avoided in the UK in 2004 if the treatment rate for AD had been increased.METHODS: Data on the prevalence of AD, alcohol consumption, and mortality were obtained from the Adult Psychiatric Morbidity Survey, the Global Information System on Alcohol and Health, and the 2004 Global Burden of Disease study respectively. Data on the effectiveness of pharmacological treatment and Motivational Interviewing/Cognitive Behavioural Therapy were obtained from Cochrane reviews and meta-analyses. Simulations were used to model the number of deaths under different treatment scenarios. Sensitivity analyses were performed to model the effects of Brief Interventions and to examine the effect of using AD prevalence data obtained from the National Institute for Health and Clinical Excellence.RESULTS: In the UK, 320 female and 1,385 male deaths would have been avoided if treatment coverage of pharmacological treatment had been increased to 20%. This decrease in the number of deaths represents 7.9% of all alcohol-attributable deaths (7.0% of all alcohol-attributable deaths for women and 8.1% of all alcohol-attributable deaths for men). If we used lower AD prevalence rates obtained from the National Institute for Health and Clinical Excellence, then treatment coverage of pharmacological treatment in hospitals for 20% of the population with AD would have resulted in the avoidance of 529 deaths in 2004 (99 deaths avoided for women and 430 deaths avoided for men).CONCLUSIONS: Increasing AD treatment in the UK would have led to a large number of deaths being avoided in 2004. Increased AD treatment rates not only impact mortality but also impact upon the large burden of disability and morbidity attributable to AD, as well as the associated social and economic burdens.

Country of Publication: England

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

Subject Headings: Adolescent
Adult
"Alcohol Drinking/ep [Epidemiology]"
"Alcoholism/dt [Drug Therapy]"
"Alcoholism/ep [Epidemiology]"
"Alcoholism/mo [Mortality]"
"*Alcoholism/th [Therapy]"
Cognitive Therapy
Cost of Illness

Female
"Great Britain/ep [Epidemiology]"
Humans
Male
Middle Aged
Motivational Interviewing
Prevalence
Young Adult

Source: MEDLINE

Full Text: Available from *ProQuest* in *BMC Health Services Research*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.
Available from *National Library of Medicine* in *BMC Health Services Research*
Available from *BioMedCentral* in *BMC Health Services Research*
Available from *Springer NHS Pilot 2014 (NESLi2)* in *BMC Health Services Research*; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

57. Alcohol: signs of improvement. The 2nd national Emergency Department survey of alcohol identification and intervention activity.

Citation: Emergency Medicine Journal, June 2013, vol./is. 30/6(492-5), 1472-0205;1472-0213 (2013 Jun)

Author(s): Patton R; O'Hara P

Institution: National Addiction Centre, Kings College London, 4 Windsor Walk, London SE5 8BB, UK. robert.patton@kcl.ac.uk

Language: English

Abstract: OBJECTIVES: To conduct a survey of current alcohol identification and brief advice activity in English Emergency Departments, and to compare the results with the previous survey conducted in 2007.METHODOLOGY: Cross-sectional survey of all 187 Emergency Departments in England.RESULTS: Significant increases ($p<0.001$) in the proportion of departments routinely asking about alcohol, using a screening questionnaire, offering help/advice for alcohol problems, and having access to Alcohol Health Workers or Clinical Nurse Specialists. More than half of all departments indicated that they had an 'alcohol champion', and this was significantly associated with access to training on both identification and provision of brief advice ($p<0.001$). Departments that routinely asked questions were the most likely to use a formal screening tool ($p<0.05$), and the Paddington Alcohol Test was the most frequently used measure (40.5%).CONCLUSIONS: There have been significant improvements in ED alcohol identification and brief advice activity since 2007 in line with the recommendations of the Royal College of Physicians, Department of Health and NICE guidelines. English EDs are beginning to maximise the likelihood of identifying patients who may benefit from further help or advice about their alcohol consumption, and are able to offer access to specialist staff who can provide appropriate interventions.

Country of Publication: England

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

Subject Headings: "*Alcohol Drinking/ep [Epidemiology]"
"*Alcohol-Related Disorders/di [Diagnosis]"
"Alcohol-Related Disorders/ep [Epidemiology]"
"Alcohol-Related Disorders/pc [Prevention and Control]"
Cross-Sectional Studies
"Emergency Service Hospital/st [Standards]"
"*Emergency Service Hospital/sn [Statistics and Numerical Data]"
England
Female
Guidelines as Topic
Humans

Male
Process Assessment (Health Care)
Questionnaires

Source: MEDLINE

Full Text: Available from *Highwire Press* in *Emergency Medicine Journal*

58. Factors affecting help seeking for mental health problems after deployment to Iraq and Afghanistan.

Citation: Psychiatric Services, January 2014, vol./is. 65/1(98-105), 1075-2730;1557-9700 (2014 Jan 1)

Author(s): Hines LA; Goodwin L; Jones M; Hull L; Wessely S; Fear NT; Rona RJ

Language: English

Abstract: OBJECTIVE: This study assessed the prevalence of general medical problems, stress or emotional problems, and alcohol problems reported by members of the armed forces of the United Kingdom after deployment in Iraq or Afghanistan. The study also identified types of help seeking and factors associated with help seeking.METHODS: A total of 4,725 military personnel who were deployed to Iraq, Afghanistan, or both were asked about health problems attributable to the deployment and whether they had sought help for them. Data were collected through postal surveys between 2007 and 2009. Service and sociodemographic covariates and measures of current mental health, alcohol misuse, and functional impairment were included in the analyses.RESULTS: Of the 19% who reported stress or emotional problems, 42% sought help, most commonly medical help (29%). Of the 6% who reported alcohol problems, 31% sought help, most commonly medical help (17%). Medical help seeking for stress or emotional problems was associated with being female, holding a lower rank, having functional impairment, and meeting criteria for two or more mental health problems. Being divorced or separated was positively associated with nonmedical help seeking for stress or emotional problems. Help seeking for alcohol problems was associated with current mental disorders.CONCLUSIONS: Medical help seeking for stress or emotional problems was uncommon and was related to meeting criteria for two or more mental health problems. Commissioned officers were reluctant to seek medical help for stress or emotional problems. Help seeking for alcohol problems increased if personnel were experiencing additional mental health problems.

Country of Publication: United States

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

Subject Headings:
Adult
Afghan Campaign 2001-
"Alcoholism/ep [Epidemiology]"
"Alcoholism/px [Psychology]"
Comorbidity
Female
"Great Britain/ep [Epidemiology]"
Humans
Iraq War 2003-2011
Male
"*Mental Disorders/ep [Epidemiology]"
"Mental Disorders/px [Psychology]"
"*Mental Health Services/ut [Utilization]"
"Military Personnel/px [Psychology]"
"*Military Personnel/sn [Statistics and Numerical Data]"
"Mood Disorders/ep [Epidemiology]"
"Mood Disorders/px [Psychology]"
Sex Factors
"Stress Disorders Post-Traumatic/ep [Epidemiology]"
"Stress Disorders Post-Traumatic/px [Psychology]"
Young Adult

Source: MEDLINE

59. A pilot randomised trial to assess the methods and procedures for evaluating the clinical effectiveness and cost-effectiveness of Exercise Assisted Reduction then Stop (EARS) among disadvantaged smokers.

Citation: Health Technology Assessment (Winchester, England), January 2014, vol./is. 18/4(1-324), 1366-5278;2046-4924 (2014 Jan)

Author(s): Taylor AH; Thompson TP; Greaves CJ; Taylor RS; Green C; Warren FC; Kandiyali R; Aveyard P; Ayres R; Byng R; Campbell JL; Ussher MH; Michie S; West R

Institution: Plymouth University Peninsula School of Medicine and Dentistry, Plymouth, UK.; Sport and Health Sciences, University of Exeter, Exeter, UK.; University of Exeter Medical School, University of Exeter, Exeter, UK.; University of Exeter Medical School, University of Exeter, Exeter, UK.; University of Exeter Medical School, University of Exeter, Exeter, UK.; University of Exeter Medical School, University of Exeter, Exeter, UK.; University of Exeter Medical School, University of Exeter, Exeter, UK.; Department of Primary Care Health Services, University of Oxford, Oxford, UK.; Plymouth University Peninsula School of Medicine and Dentistry, Plymouth, UK.; Plymouth University Peninsula School of Medicine and Dentistry, Plymouth, UK.; University of Exeter Medical School, University of Exeter, Exeter, UK.; Division of Population Health Sciences and Education, St George's University of London, London, UK.; Research Department of Clinical, Educational and Health Psychology, University College London, London, UK.; Health Behaviour Research Centre, Department of Epidemiology and Public Health, University College London, London, UK.

Language: English

Abstract: BACKGROUND: There have been few rigorous studies on the effects of behavioural support for helping smokers to reduce who do not immediately wish to quit. While reduction may not have the health benefits of quitting, it may lead smokers to want to quit. Physical activity (PA) helps to reduce cravings and withdrawal symptoms, and also reduces weight gain after quitting, but smokers may be less inclined to exercise. There is scope to develop and determine the effectiveness of interventions to support smoking reduction and increase physical activity, for those not ready to quit.OBJECTIVE: To conduct a pilot randomised controlled trial (RCT) [Exercise Assisted Reduction then Stop (EARS) smoking study] to (1) design and evaluate the feasibility and acceptability of a PA and smoking-reduction counselling intervention [for disadvantaged smokers who do not wish to quit but do want to reduce their smoking (to increase the likelihood of quitting)], and (2) to inform the design of a large RCT to determine the clinical effectiveness and cost-effectiveness of the intervention.DESIGN: A single-centre, pragmatic, pilot trial with follow-up up to 16 weeks. A mixed methods approach assessed the acceptability and feasibility of the intervention and trial methods. Smokers were individually randomised to intervention or control arms.SETTING: General practices, NHS buildings, community venues, and the Stop Smoking Service (SSS) within Plymouth, UK.PARTICIPANTS: Aged>18 years, smoking>10 cigarettes per day (for>2 years) who wished to cut down. We excluded individuals who were contraindicated for moderate PA, posed a safety risk to the research team, wished to quit immediately or use Nicotine Replacement Therapy, not registered with a general practitioner, or did not converse in English.INTERVENTION: We designed a client-centred, counselling-based intervention designed to support smoking reduction and increases in PA. Support sessions were delivered by trained counsellors either face to face or by telephone. Both intervention and control arms were given information at baseline on specialist SSS support available should they have wished to quit.MAIN OUTCOME MEASURES: The primary outcome was 4-week post-quit expired air carbon monoxide (CO)-confirmed abstinence from smoking. Secondary outcomes included validated behavioural, cognitive and emotional/affective and health-related quality of life measures and treatment costs.RESULTS: The study randomised 99 participants, 49 to the intervention arm and 50 to the control arm, with a 62% follow-up rate at 16 weeks. In the intervention and control arms, 14% versus 4%, respectively [relative risk=3.57; 95% confidence interval (CI) 0.78 to 16.35], had expired CO-confirmed abstinence at least 4 and up to 8 weeks after quit day; 22% versus 6% (relative risk=3.74; 95% CI 1.11 to 12.60) made a quit attempt; 10% versus 4% (relative risk=92.55; 95% CI 0.52 to 12.53) achieved point-prevalent abstinence at 16 weeks; and 39% versus 20% (relative risk=1.94; 95% CI 1.01 to 3.74)

achieved at least a 50% reduction in the number of cigarettes smoked daily. The percentage reporting using PA for controlling smoking in the intervention versus control arms was 55% versus 22%, respectively at 8 weeks and 37% versus 16%, respectively, at 16 weeks. The counsellors generally delivered the intervention as planned and participants responded with a variety of smoking reduction strategies, sometimes supported by changes in PA. The intervention costs were approximately 192 per participant. Exploratory cost-effectiveness modelling indicates that the intervention may be cost-effective.CONCLUSIONS: The study provided valuable information on the resources needed to improve study recruitment and retention. Offering support for smoking reduction and PA appears to have value in promoting reduction and cessation in disadvantaged smokers not currently motivated to quit. A large RCT is needed to assess the clinical effectiveness and cost-effectiveness of the intervention in this population.TRIAL REGISTRATION: ISRCTN 13837944.FUNDING: This project was funded by the NIHR Health Technology Assessment programme and will be published in full in Health Technology Assessment, Vol. 18, No. 4. See the NIHR Journals Library website for further project information.

Country of Publication: England

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

Subject Headings:
Adult
Cost-Benefit Analysis
"Counseling/ec [Economics]"
"*Counseling/mt [Methods]"
*Exercise
Female
Health Behavior
Humans
Male
Middle Aged
Motivation
Pilot Projects
*Poverty
Quality of Life
Self Efficacy
"Smoking Cessation/ec [Economics]"
"*Smoking Cessation/mt [Methods]"
"*Smoking Cessation/px [Psychology]"
Social Support
Socioeconomic Factors
"Tobacco Use Disorder/px [Psychology]"
"Tobacco Use Disorder/th [Therapy]"
Vulnerable Populations

Source: MEDLINE

60. Medical specialists' views on the impact of reducing alcohol consumption on prognosis of, and risk of, hospital admission due to specific medical conditions: results from a Delphi survey.

Citation: Journal of Evaluation in Clinical Practice, February 2014, vol./is. 20/1(100-10), 1356-1294;1365-2753 (2014 Feb)

Author(s): Mdege ND; Raistrick D; Johnson G

Institution: Department of Health Sciences, University of York, York, UK.

Language: English

Abstract: RATIONALE, AIMS AND OBJECTIVES: To find consensus, or lack thereof, on the impact of reducing alcohol consumption on prognosis and the risk of hospital admissions for a number of alcohol-attributable disorders.METHODS: A modified two-round Delphi survey utilizing web-based questionnaires to collect quantitative and qualitative data was used. Alcohol treatment experts from cardiology, emergency medicine, gastroenterology and oncology in the United Kingdom were invited to participate. The main outcomes

were median impact ratings (on a scale of 1-9) and consensus (unanimous, strong, moderate, weak or no consensus).RESULTS: Of 192 experts invited to participate, 59 completed first questionnaires. The overall retention rate to the second questionnaires was about 51% (30/59). There was strong support that reducing alcohol consumption could result in improvement in prognosis for gastroenterology and emergency medicine patients; but uncertainty on the benefits for cardiology and oncology patients. Overall, the responses from the expert panel did not reflect the assumption that reducing alcohol consumption would result in benefits on hospital admissions for any of the specialties. The specialists viewed the severity of disorders as important when considering the impact of reducing alcohol consumption.CONCLUSIONS: The highest impact of treatment for problem drinking in hospitals is considered to be for alcohol-related disorders associated with gastroenterology and emergency medicine. At policy level, if targeted screening for alcohol problems by presenting disease or condition is the strategy of choice, it would be logical to implement screening and easily accessible interventions or addiction specialists within these areas where alcohol treatment is considered as having a high impact. 2013 John Wiley & Sons, Ltd.

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Humans
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Risk Factors
*Specialization

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61. A pilot randomised trial to assess the methods and procedures for evaluating the clinical effectiveness and cost-effectiveness of Exercise Assisted Reduction then Stop (EARS) among disadvantaged smokers.

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Abstract: BACKGROUND: There have been few rigorous studies on the effects of behavioural support for helping smokers to reduce who do not immediately wish to quit. While reduction may not have the health benefits of quitting, it may lead smokers to want to quit. Physical activity (PA) helps to reduce cravings and withdrawal symptoms, and also reduces weight gain after quitting, but smokers may be less inclined to exercise. There is

scope to develop and determine the effectiveness of interventions to support smoking reduction and increase physical activity, for those not ready to quit.OBJECTIVE: To conduct a pilot randomised controlled trial (RCT) [Exercise Assisted Reduction then Stop (EARS) smoking study] to (1) design and evaluate the feasibility and acceptability of a PA and smoking-reduction counselling intervention [for disadvantaged smokers who do not wish to quit but do want to reduce their smoking (to increase the likelihood of quitting)], and (2) to inform the design of a large RCT to determine the clinical effectiveness and cost-effectiveness of the intervention.DESIGN: A single-centre, pragmatic, pilot trial with follow-up up to 16 weeks. A mixed methods approach assessed the acceptability and feasibility of the intervention and trial methods. Smokers were individually randomised to intervention or control arms.SETTING: General practices, NHS buildings, community venues, and the Stop Smoking Service (SSS) within Plymouth, UK.PARTICIPANTS: Aged>18 years, smoking>10 cigarettes per day (for>2 years) who wished to cut down. We excluded individuals who were contraindicated for moderate PA, posed a safety risk to the research team, wished to quit immediately or use Nicotine Replacement Therapy, not registered with a general practitioner, or did not converse in English.INTERVENTION: We designed a client-centred, counselling-based intervention designed to support smoking reduction and increases in PA. Support sessions were delivered by trained counsellors either face to face or by telephone. Both intervention and control arms were given information at baseline on specialist SSS support available should they have wished to quit.MAIN OUTCOME MEASURES: The primary outcome was 4-week post-quit expired air carbon monoxide (CO)-confirmed abstinence from smoking. Secondary outcomes included validated behavioural, cognitive and emotional/affective and health-related quality of life measures and treatment costs.RESULTS: The study randomised 99 participants, 49 to the intervention arm and 50 to the control arm, with a 62% follow-up rate at 16 weeks. In the intervention and control arms, 14% versus 4%, respectively [relative risk=3.57; 95% confidence interval (CI) 0.78 to 16.35], had expired CO-confirmed abstinence at least 4 and up to 8 weeks after quit day; 22% versus 6% (relative risk=3.74; 95% CI 1.11 to 12.60) made a quit attempt; 10% versus 4% (relative risk=92.55; 95% CI 0.52 to 12.53) achieved point-prevalent abstinence at 16 weeks; and 39% versus 20% (relative risk=1.94; 95% CI 1.01 to 3.74) achieved at least a 50% reduction in the number of cigarettes smoked daily. The percentage reporting using PA for controlling smoking in the intervention versus control arms was 55% versus 22%, respectively at 8 weeks and 37% versus 16%, respectively, at 16 weeks. The counsellors generally delivered the intervention as planned and participants responded with a variety of smoking reduction strategies, sometimes supported by changes in PA. The intervention costs were approximately 192 per participant. Exploratory cost-effectiveness modelling indicates that the intervention may be cost-effective.CONCLUSIONS: The study provided valuable information on the resources needed to improve study recruitment and retention. Offering support for smoking reduction and PA appears to have value in promoting reduction and cessation in disadvantaged smokers not currently motivated to quit. A large RCT is needed to assess the clinical effectiveness and cost-effectiveness of the intervention in this population.TRIAL REGISTRATION: ISRCTN 13837944.FUNDING: This project was funded by the NIHR Health Technology Assessment programme and will be published in full in Health Technology Assessment, Vol. 18, No. 4. See the NIHR Journals Library website for further project information.

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*Exercise
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Health Behavior
Humans
Male
Middle Aged

Motivation
Pilot Projects
*Poverty
Quality of Life
Self Efficacy
"Smoking Cessation/ec [Economics]"
"*Smoking Cessation/mt [Methods]"
"*Smoking Cessation/px [Psychology]"
Social Support
Socioeconomic Factors
"Tobacco Use Disorder/px [Psychology]"
"Tobacco Use Disorder/th [Therapy]"
Vulnerable Populations

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