

Search Results

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Search History

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2. PsycINFO; addict*.ti,ab; 25722 results.
3. PsycINFO; 1 OR 2; 47561 results.

1. Addiction to prescription drugs: An interpretative phenomenological analysis and constructionist study.

Citation:	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)
Author(s):	Hallinan, Thomas M
Institution:	Duquesne U., US
Language:	English
Abstract:	This study presents an interpretative phenomenological analysis of the experience of becoming addicted to prescription medications. In addition, a constructionist analysis of the cultural, sociopolitical, and historical aspects of addiction are examined. The modern concept of addiction did not begin to come into being until the late nineteenth century. The twentieth century saw the beginning of government regulation and restrictions on the prescription, possession, and use of pharmaceuticals. The latter half of the twentieth century saw not only the boom of the pharmaceutical industry, but the explosion of addictive disorder and the rise of the Twelve Step program for addiction. Addiction, as a culturally constructed phenomenon, is still a hotly contested issue, with extreme views on opposite ends of the spectrum, even among treating professionals. Prescription medication addiction, in particular, has been on the rise for several decades. Toward the exploration and understanding of prescription pill addiction six male participants were recruited and interviewed for the research data and an interpretative phenomenological analysis was applied to this data. The following superordinate themes emerged and were explored: early experiences with drugs, a perception of prescription drugs as safer than street drugs, a movement away from an ideal self, denial and avoidance, and a sense of powerlessness. In addition, cultural factors impacting the experience of the participants' addictions were investigated. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Publication Type:	Dissertation Abstract
Subject Headings:	*Addiction *Phenomenology *Prescription Drugs Pharmaceutical Industry
Source:	PsycINFO

2. Examining the relationship between parenting perceptions and online gaming.

Citation:	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)
Author(s):	Kidkarndee, Smith
Institution:	Pace U., US
Language:	English
Abstract:	The purpose of this current study was to contribute to the existing parenting and online gaming literature by investigating the relationship between the perceptions of parenting (in both parents and non-parents), as outlined by the Parent Development Theory (PDT) and online gaming behaviors, as measured by the Online Gaming Use Questionnaire (OGUQ) and the Game Addiction Scale (GAS). The influences of gender, ethnic/racial background, age, and parental status were also considered to explore the relationship between parenting perceptions and online game behaviors. The final sample consisted of 334 online participants from the United States (83.2%) and other international countries (16.8%). Participants completed three online measures via Qualtrics: the Online Gaming Use Questionnaire (OGUQ), the Game Addiction Scale (GAS), and the Parenting Behavior Importance Questionnaire -- Revised (PBIQ-R). The results indicate that online gaming use is best measured by considering individuals' current level of gaming, dedication to gaming, as well as time spent on games daily and weekly. The results also demonstrate that participants' level of online gaming behaviors, as measured by the GAS, influences their perceptions of parenting, as assessed by the PBIQ-R. For example, the

lowered importance of parenting behaviors, such as bonding, education, responsiveness, sensitivity, negativity, and positivity were predicted by the conflict subscale (GASC) of the GAS. The GAS scores were associated with problematic online gaming behaviors such as salience, tolerance, mood modification, relapse, withdrawal, conflict, and problems. Significant group differences in demographic variables such as gender, ethnic/racial background, and parental status were found with regard to online gaming behaviors and parenting perceptions. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Addiction](#)
[*Parenting Style](#)
[*Parents](#)
[Parent Child Relations](#)
[Questionnaires](#)

Source: PsycINFO

3. The experiences of women entering methadone treatment for opioid use: An interpretive phenomenological inquiry.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Rubio, Melissa

Institution: U Wisconsin - Milwaukee, US

Language: English

Abstract: The United States is facing a momentous public health problem of prescription and illicit opioid use among women. Traditionally in health literature women have received less attention than men and this is especially true with regard to drug use. In terms of recovery from opioid use, treatment centers that use methadone as a pharmaceutical replacement for illicit opioids have been present in the US for decades, and women have been enrolling in treatment since its inception. However, there is little in the literature about the characteristics of these women, why they choose methadone treatment, and what their experiences are while in treatment. The study explores the experiences of thirteen women entering methadone treatment at a clinic in urban Fort Worth, Texas. Through the narrative descriptions of their history of drug use, reasons for deciding to get help, accounts of why they chose methadone and their experiences during their time in treatment are answered. An Interpretive Phenomenological qualitative research method was employed throughout to gather and understand the stories of women drug users searching for help. This method explores their beliefs about challenges, pitfalls and triumphs of recovery. Results from this study will add to the knowledge base about women and substance use disorders as well as women and change. Findings will help nurses and those in other disciplines to better understand the problem of opioid use among US women and assist women in traversing through the addiction journey. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Methadone Maintenance](#)
[*Opiates](#)
[*Public Health](#)
[Human Females](#)
[Methadone](#)
[Phenomenology](#)
[Qualitative Research](#)

Source: PsycINFO

4. An investigation of the common patterns of brain activation in response to addiction and media events.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Klahr, Nelson J

Institution: U Florida, US

Language: English

Abstract: Functional MRI has now become the most efficient tool to study functions in the human brain. It is most often used to measure the Blood Oxygen Level Dependent (BOLD) signal that theoretically represents a corresponding proportional level of cognitive activity. Our research group applied this technique in several studies that involved a variety of different forms of addiction and emotional responses to related stimuli and cues. In separate paradigms, we asked participants to watch television commercials, drink a low dose alcoholic beverage, and rate their feelings towards pictures of smoking content while we scanned their brains looking for common patterns and locations of neural activation. The results obtained from each specific study showed that the behavioral data collected evidently reflect the hypothesized imaging data. More importantly, our reported findings also contribute in the efforts towards establishing a medical paradigm observed in patients afflicted with many different forms of addiction by illustrating the roles of the various components involved in modeling this neural network. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Functional Magnetic Resonance Imaging](#)
[Addiction](#)

Source: PsycINFO

5. Diet and dopamine: Novel role of insulin in reward signaling.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Stouffer, Melissa A

Institution: New York U., US

Language: English

Abstract: The role of brain reward circuitry in both drug use and ingestive behavior is increasingly appreciated. A key link is the common involvement of the mesolimbic and nigrostriatal dopamine (DA) pathways. The mesolimbic DA pathway originates in the ventral tegmental area (VTA), whose targets include the nucleus accumbens (NAc) in the ventral striatum. This pathway mediates rewarding effects of both food and drugs: intake of palatable food or drugs increase extracellular DA concentration ([DA]_o) in the NAc. Moreover, elevated NAc DA signaling promotes goal-directed behavior and reward-related learning. The parallel nigrostriatal pathway originates in the substantia nigra pars compacta (SNc) and projects to dorsal striatum, also referred to as the caudate-putamen (CPu). This pathway contributes to motivated behaviors and drug craving, and is involved in driving instrumental behavior once it has transitioned from goal-directed to automatic and compulsive. Chronic diet modifications can lead to striatal neuroadaptations that resemble those induced by chronic drug use that leads to addiction. Indeed, much evidence linking ingestive and drug-seeking behavior has come from studies of chronically food-restricted (FR) animals, and, more recently, animals maintained on a chronic high-energy and/or high fat, obesity-promoting diet (OB). Compared to control ad libitum (AL) fed subjects, FR and OB rats demonstrate increased and decreased sensitivity to drugs of abuse, respectively. There is increasing evidence that neuroadaptations in FR and OB rats are mediated at least in part by endocrine adiposity hormones, such as insulin, which can modulate incentive effects of food, in proportion to body fat mass. The role of insulin signaling in the hypothalamus to provide negative feedback to appetitive circuits that decrease further eating after a meal is well established. Once insulin has crossed the blood-brain barrier, it can also act at insulin receptors (IRs) elsewhere in the brain; the functional of these IRs are largely unknown. Recent studies

indicate that insulin can decrease dopamine DA signaling in the striatum and VTA by upregulating the DA transporter (DAT), thereby promoting satiety. Here, I report the first evidence that insulin can also act as a reward signal by amplifying action potential-dependent DA release in the NAc core and shell, and in the CPu. With the help of my collaborators, we found that the primary effect of insulin on DA release is not direct on DAergic axons, but indirect via striatal cholinergic interneurons (ChIs), which we find have abundant IR expression. My data supports the hypothesis that insulin increases ChI excitability, resulting in increased ACh release and activation of presynaptic nAChRs that increases DA release. Furthermore, I found that FR and an OB diet both decrease action potential-dependent striatal DA release, and also that insulin responsiveness is enhanced in FR but lost in OB rats. These data imply that altered striatal IR sensitivity helps determine how rewarding food is, and may thereby contribute to pathological eating behaviors. In order to support this hypothesis, I performed several behavioral experiments using instrumental and Pavlovian conditioning in combination with insulin microinjections into the NAc. Although insulin signaling did not appear to increase the highly rewarding effects of lateral hypothalamic self-stimulation, spontaneous locomotion, nor food-conditioned hyperactivity, the final experiment presented in this thesis suggests that insulin may play a role in generating food preferences. Microinjection of insulin receptor antibody into the NAc core caused a decreased preference for paired flavor, implying that insulin signaling may enhance DA release to modulate food choices based on caloric content. This finding is in line with other studies in the literature that indicate reward independent of taste; in this case, insulin ... (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Insulin](#)
[*Neural Receptors](#)
[*Nucleus Accumbens](#)
[*Rats](#)
[Diets](#)
[Dopamine](#)
[Eating Behavior](#)
[Rewards](#)
[Interneurons](#)
[Body Fat](#)

Source: PsycINFO

6. A stress-diathesis examination of internet addiction: Perceived stress, the big five personality factors, perfectionism, and internet addiction among college students.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Shueh, Tong-An

Institution: U Florida, US

Language: English

Abstract: Internet addiction has been a growing concern in the United States, and college students may be especially at-risk. This study focused on examining Internet addiction and its relationships with perceived stress, the Big Five personality factors, perfectionism, and other theoretically related personality variables among 1465 college students. Bivariate correlation analysis revealed that perceived stress was positively correlated with Internet addiction level. Results from hierarchical multiple regression analyses showed that Internet addiction was positively associated with neuroticism (higher-order personality factor) and maladaptive perfectionism (lower-order personality factor). Internet addiction also was negatively correlated with conscientiousness, extraversion, and openness (higher-order personality factors) and adaptive perfectionism (lower-order personality factor). A significant interaction was observed between perfectionism's two dimensions, discrepancy and standards, in predicting Internet addiction. The findings are discussed in light of the stress-diathesis perspective and the Stress Response Dampening Model.

Limitations, future research directions, and implications for counseling practice are also addressed. (Full text of this dissertation may be available via the University of Florida Libraries web site. Please check <http://www.uflib.ufl.edu/etd.html>) (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Internet](#)
[*Internet Addiction](#)
[*Perfectionism](#)
[College Students](#)
[Colleges](#)
[Stress](#)

Source: PsycINFO

7. Reliability and validity of a substance craving scale: Testing invariance across substances.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Mazza, Jessica

Institution: U Illinois at Chicago, US

Language: English

Abstract: Introduction Craving for alcohol or drugs has been studied for many years by scholars and clinicians in an effort to improve the efficiency of substance abuse treatment across individuals and settings. The reduction of craving has been conceptualized as a target of intervention in addiction treatment programs and post treatment relapse prevention programs. The purpose of this research was to develop a substance craving scale that is reliable and valid for use across substance use disorders. The scale was examined via the Rasch model, an item response theory model that provides the analysis of data through use of a single, difficulty parameter. To date, there has been no Rasch analysis conducted of a substance craving scale that assesses cravings for all substances. Methods The current Substance Craving Scale was developed based on several of the prior validated, drug-specific scales that are used to measure substance craving. An additional craving item, used on the National Longitudinal Alcohol Epidemiologic Survey and a key basis of the DSM-V decision to add craving as a criterion, was also included in the final scale. Analysis of the data employed both Rasch and traditional test theory techniques. The measure was analyzed with a Rasch dichotomous model with Winsteps statistical software, and other techniques used SPSS statistical software. Analyses were performed to provide summary statistics of the data, to determine item fit, dimensionality of the measure, reliability, validity, and differential item functioning (DIF) for substance of choice. Results The results showed that all but one item on the measure were appropriate based on a preliminary item analysis, and the final psychometric analyses were conducted on the revised 11- item scale. The craving scale was found to be unidimensional, reliable for research purposes, and showed evidence of validity of construct. Most importantly, there was no significant differential item functioning by substance of choice. Discussion. Several items were discussed regarding their theoretical importance, and the validity and reliability of the scale were critiqued. Limitations of the study included homogeneity of the sample, hence reliability and validity of the Substance Craving Scale should be replicated in different samples, especially for those individuals entering substance treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Drug Abuse](#)
[*Item Analysis \(Statistical\)](#)
[Clinicians](#)
[Craving](#)
[Item Response Theory](#)

Source: PsycINFO

8. Substance abuse treatment seeking of older adults.

- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)
- Author(s):** Layton, Cynthia N
- Institution:** Walden U., US
- Language:** English
- Abstract:** Substance abuse and dependence are major problems for all ages, but they are increasingly observed in adults 50 and older. Many adults in this group do not seek treatment for their substance related disorder because they do not feel the need. There is a gap in the literature as the research is not clear on how these perceptions relate to other conditions. The purpose of this quantitative study was to examine the relationship between feeling the need for treatment, and physical and mental health conditions based on age. This study is based on the 6 constructs in the health belief model: perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy. The research questions in this study looked to see if the conditions predicted feeling a need for treatment and pursuing treatment in older adults, defined as 50 years and older. This secondary analysis utilized the 2011 National Survey on Drug Use and Health (NSDUH) dataset for 7,630 respondents with reported substance abuse or dependence. A logistic regression analysis determined if the conditions were predictors of treatment seeking behavior utilizing appropriate variables in the dataset. Results indicated that the only predictors of wanting treatment are reporting depression, anxiety, or STDs and in the age group of 49 and younger. Future research should concentrate on understanding why the older adult is less likely to seek treatment. Social change implications indicate finding ways to encourage adults in this group of the benefits of treatment, and the education of misusing alcohol, drugs, and other medications. The sober older adult could be a beneficial asset to younger people to share experiences and educate them on the dangers of substance related disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
- Publication Type:** Dissertation Abstract
- Subject Headings:** [*Aging](#)
[*Drug Abuse](#)
[*Health Attitudes](#)
[*Major Depression](#)
[Side Effects \(Drug Treatment\)](#)
- Source:** PsycINFO

9. The performance and feasibility of three brief alcohol screening tools in a senior population.

- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)
- Author(s):** Purcell, Bonnie W
- Institution:** Queen's U., Canada
- Language:** English
- Abstract:** Screening is the first step in identifying and treating alcohol-related problems among the senior population. This study was designed with two purposes. The first was to cross-validate the Senior Alcohol Misuse Indicator (SAMI) with two commonly used screening tools - the CAGE and the Shortened Michigan Alcoholism Screening Test - Geriatric version (SMAST-G). The second purpose was to examine the feasibility of using these tools within a front-line health care worker's clinical protocol. The effectiveness of each screening tool was assessed by calculating the sensitivity, specificity, and the area under the receiver operating characteristic (AUROC) for each screening tool with a sample of seniors recruited from clinical and community sources (N=87). Participants were classified into different types of drinker with a structured

clinical interview (i.e., the Structured Clinical Interview for the DSM-IV and a medical history, including medication list). Seven problem drinkers, 36 at-risk drinkers, 25 non-problem drinkers, and 19 non-drinkers were identified. Among the three screening tools, the SAMI had the highest sensitivity (83.72%) in identifying at-risk drinkers and problems drinkers and best overall performance with the greatest AUROC (0.710), whereas the SMAST-G had the highest specificity (95.45%) in ruling out an alcohol-related problem among participants classified as non-problem drinkers and non-drinkers. Six outreach mental health care workers tested each screening tool at least three times with their senior clientele and rated each tool on a number of characteristics. An ANOVA and post-hoc analyses using the Least Significant Difference (LSD) compared these ratings among the three screening tools. The SMAST-G and CAGE were cited as the easiest to score ($p=0.002$), while the SMAST-G was cited as the screening tool providing the most clinical information ($p=0.047$) and the most comprehensive ($p=0.019$) of the three tools. These results point to the overall effectiveness of the SAMI and the user-friendliness of the SMAST-G as appropriate screening tools for identifying alcohol-related problems among the senior population. Future studies may further examine these two screening tools among as-yet-untested clinical populations (i.e., geriatric mental health outreach patients, cognitively impaired, collateral informants) and how to improve screening tool usage among health care providers. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract
Subject Headings: [*Alcoholism](#)
[*At Risk Populations](#)
[*Screening](#)
Source: PsycINFO

10. Suicidal behavior among older adults evaluated in nyc emergency departments: 2004 And 2010.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Mason, Sophia C

Institution: Capella U., US

Language: English

Abstract: The purpose of this descriptive comparative research study was to examine the prevalence of emergency department visits by individuals evidencing suicidal behaviors in five boroughs of New York City who sought mental health services during the two years of 2004 and 2010. Mental health and substance use are major health problem in society and are often addressed in emergency departments (EDs). Using data from the Drug Abuse Warning Network report, this retrospective descriptive correlational quantitative study was guided by the Dahlgren and Whitehead framework. The sample consisted of individuals who received treatment at any of the public hospital EDs in the five New York boroughs during the two years of 2004 and 2010. The data analysis was designed around five research questions; specific variables were predetermined and analyzed and the two-prevalence z test was used to determine the statistical outcomes. There was a significant increase in the prevalence rates of ED visits among older adults 55 years or older from the five boroughs in New York City when comparing 2004 to 2010. There was also a significant increase in the prevalence rates of alcohol use among these individuals when comparing 2004 to 2010. Likewise, there was a significant increase in the prevalence rates of major substance abuse by the two groups when comparing 2004 to 2010. The data also indicate that there was a significant increase in the prevalence rates of home releases when comparing 2004 to 2010. In addition, there was an increase in referrals to psychiatric inpatient facilities when comparing 2004 to 2010. When comparing these two years, there was an increase in the number of older African American and Hispanic adults visiting the ED, but there were no statistical differences among European Americans. Finally, there was a statistical significance in "no follow-up" treatment when comparing 2004 to 2010. The ED remains a major health resource for individuals 55 years and older. Effective screening and treatment for individuals with

suicidal behaviors, mental health and substance abuse disorders in EDs are essential. Follow up in communities within the context of primary health care should be routinely implemented and continuously evaluated (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract
Subject Headings: [*Age Differences](#)
[*Drug Abuse](#)
[*Epidemiology](#)
[*Mental Disorders](#)
[Suicide](#)
Source: PsycINFO

11. The role of the intuitive function in addiction recovery.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Dakin, Cary Elizabeth

Institution: Pacifica Graduate Inst., US

Language: English

Abstract: This study examines the role of the intuitive function in addiction recovery. Addictive behaviors create an internal state dominated by imbalanced instinctual drives. The psychological manifestations are obsessive thoughts, anxiety, depression, guilt, shame, and a sense of isolation. This research explored how subtle unconscious influences like the intuitive function have a role in shifting this treacherous internal state. Intuition is a prominent spectrum function which bridges the unconscious and conscious by providing unexpected knowledge of unknown origins when none is consciously available, assesses potential of situations, and imparts understanding of how and when to carry out instinctual action (Jung, 1971/1976, 1948/1981a). Field research was conducted through a qualitative, intuitive, phenomenological methodology. Twelve participants in recovery from alcoholism were asked through conversational interviews about their experience of intuition in sobriety. The participants claimed intuition initiated, sustained, and enhanced their sobriety. They were able to distinguish the intuitive function from the amplified state of need, obsessive thought, and angst. They reported synchronicities, dreams and intuitive influences were instrumental in the decision to stop drinking. In longer term recovery, the intuitive function was perceived when helping others, solving problems, learning self-care, and enhanced intuition was described as one of the biggest gifts of sobriety. This research contributes to the field of psychotherapy by discovering the important role of the intuitive function in addiction recovery. Recognizing and helping patients cultivate intuition facilitates the apprehension of addictive behaviors. Working with unconscious functions such as intuition helps those considering sobriety, as well as those in sobriety, to establish a relationship with their unconscious other than one based on addictive patterns. Developing the intuitive function in recovery establishes a conscious relationship to the primary process beyond impulsivity and curbs instinctual impulsivity. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract
Subject Headings: [*Addiction](#)
[*Major Depression](#)
Source: PsycINFO

12. The lived experience of clients treated with buprenorphine for opioid withdrawal protracted depression.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Marcel, Samuel L

Institution: Capella U., US

Language: English

Abstract: Opioid users detoxifying from opioid drugs are at risk of developing a substance-induced mood disorder that meets the symptomatic and duration criteria for dysthymic disorder or major depression. An opioid induced mood disorder such as depression may develop during the intoxication or the withdrawal state. During the withdrawal state, the depressed symptoms can be relatively protracted (Diagnostic and Statistical Manual of Mental Disorders Fourth Edition-Text Revised (APA, 2000). One of the major problems in treating the opiate user with protracted depression is the lack of knowledge concerning the views of the opiate user while in aftercare. Buprenorphine, a semi-synthetic opioid derivate (a partial mu receptor agonist and kappa receptor antagonist), has the potential to act as an anti-depressive agent to help treat patients with opiate withdrawal symptoms such as protracted withdrawal depression (Kintz and Marquet, 2002). A purposeful sampling strategy, criterion sampling (studying participants who have a similar experience as related to the research question) was utilized to recruit and select participants for this research study (Patton, 2002; Marshall & Rossman, 2006). The sample for this study was seven former aftercare participants, four males and three females between the ages of 20 to 50 years old, treated with buprenorphine for opiate withdrawal protracted depression. A qualitative study was used to explore and develop a psychological structure of the lived experience of former aftercare participants treated with buprenorphine for protracted depression related to opiate withdrawal. The qualitative approach selected to analyze this study was guided by the descriptive phenomenological method based on Giorgi's model (Giorgi, 2009). Constituents that emerged from this study included feeling rejuvenated with a renewed outlook on life, buprenorphine viewed as a "miracle drug" that allowed the participants to refocus on family and social obligation, developing a positive attitude toward participation in aftercare, and abstains from opiates without the desire or craving to use. The understanding of the participants' lived experiences in aftercare can serve as a guideline for healthcare and addiction providers who are interested in developing a foundation for an integration program that will meet the needs of opiate users. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Clients](#)
[*Drug Therapy](#)
[*Drug Withdrawal](#)
[*Dysthymic Disorder](#)
[*Emotional States](#)
[Opiates](#)

Source: PsycINFO

13. Adolescent risk taking, dopamine signaling, and cocaine self-administration: A vicious cycle.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/7-B(E)(No Pagination Specified), 0419-4217 (2015)

Author(s): Mitchell, Marci Rae

Institution: U Florida, US

Language: English

Abstract: In adolescence, poor decision making, risk taking, and drug use have been strongly linked; however the causal relationships among these factors are poorly understood. As causality is difficult to disentangle in humans, an animal model of risk taking was used to investigate causal relationships between adolescent risk taking and cocaine self-administration in rats. Specifically, a Risky Decision-making Task (RDT) that was developed in our laboratory was used to investigate whether risky decisionmaking is a pre-existing condition which may predict the propensity for drug use, and/or if elevated risk taking is a result of drug use itself. In addition, the RDT was used to determine if the relationships between risky decision-making are modulated by dopaminergic signaling in the prefrontal cortex and striatum, as these brain regions have been heavily implicated in mediating both risky decision-making and drug use. Findings from the experiments

indicated that individual variability in RDT performance during adolescence significantly predicted cocaine intake (i.e., greater risk taking was associated with greater cocaine intake) and that cocaine self-administration rats exhibited greater risk taking compared to controls even after 6 weeks of abstinence. Moreover, lower striatal D1 and D2 receptor expression was associated with greater adolescent risk taking, and activation of D2 receptors in the ventral, but not dorsal, striatum biased choice behavior toward a more risk averse pattern. These data indicate that adolescent risk taking predicts acquisition of cocaine self-administration, and that cocaine self-administration can cause long-lasting elevations in risk taking. The findings that lower dopamine receptor expression in striatum was associated with elevated risk taking and that activation of dopamine (especially D2) receptors in the ventral striatum biased choice behavior in the RDT toward greater risk aversion strongly suggest that D2 receptors play a causal role in both risk taking behavior and cocaine use. Together these findings provide support for a "vicious cycle" between risk taking and cocaine use which may be regulated by D2 receptors and might contribute to addictive processes. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Animal Models](#)
[*Causality](#)
[*Cocaine](#)
[*Decision Making](#)
[Dopamine](#)
[Rats](#)
[Risk Taking](#)

Source: PsycINFO

14. Development and content validity of a screening instrument for gaming addiction in adolescents: The gaming addiction identification test (gait).

Citation: Scandinavian Journal of Psychology, January 2015(No Pagination Specified), 0036-5564;1467-9450 (Jan 23, 2015)

Author(s): Vadlin, Sofia; Aslund, Cecilia; Nilsson, Kent W

Abstract: This study describes the development of a screening tool for gaming addiction in adolescents - the Gaming Addiction Identification Test (GAIT). Its development was based on the research literature on gaming and addiction. An expert panel comprising professional raters (n = 7), experiential adolescent raters (n = 10), and parent raters (n = 10) estimated the content validity of each item (I-CVI) as well as of the whole scale (S-CVI/Ave), and participated in a cognitive interview about the GAIT scale. The mean scores for both I-CVI and S-CVI/Ave ranged between 0.97 and 0.99 compared with the lowest recommended I-CVI value of 0.78 and the S-CVI/Ave value of 0.90. There were no sex differences and no differences between expert groups regarding ratings in content validity. No differences in the overall evaluation of the scale emerged in the cognitive interviews. Our conclusions were that GAIT showed good content validity in capturing gaming addiction. The GAIT needs further investigation into its psychometric properties of construct validity (convergent and divergent validity) and criterion-related validity, as well as its reliability in both clinical settings and in community settings with adolescents. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Scandinavian Psychological Associations and John Wiley & Sons Ltd; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Wiley* in [Scandinavian Journal of Psychology](#)

15. Role of the striatopallidal pathway in renewal and reacquisition of alcohol seeking.

Citation: Behavioral Neuroscience, February 2015, vol./is. 129/1(2-7), 0735-7044;1939-0084 (Feb 2015)

Author(s): Khoo, Audrey T; Gibson, Gabrielle D; Prasad, Asheeta A; McNally, Gavan P

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Institution: School of Psychology, The University of New South Wales, Sydney, NSW, Australia; School of Psychology, The University of New South Wales, Sydney, NSW, Australia; School of Psychology, The University of New South Wales, Sydney, NSW, Australia; School of Psychology, The University of New South Wales, Sydney, NSW, Australia

Language: English

Abstract: The ventral pallidum (VP) is a key component of the neural circuitry mediating relapse to drug seeking, but the critical afferent pathways to VP recruited during relapse remain poorly understood. We studied the role of the nucleus accumbens core (AcbC) -> VP pathway in ABA renewal and reacquisition of alcohol seeking. Rats received application of adenoviral vectors encoding eYFP, ChR2(H134R), or eNpHr3.0 to AcbC and implantation of fiber optic cannulas into VP to permit photostimulation of AcbC terminals there. Rats were then trained to self-administer alcoholic beer in 1 context (A), extinguished in a second context (B), tested in the extinction (ABB) and training (ABA) contexts, and were then tested for reacquisition of alcoholic beer seeking. There was ABA renewal of alcohol seeking, but neither optogenetic excitation nor inhibition of the AcbC -> VP pathway affected this renewal. In contrast, optogenetic inhibition of the AcbC -> VP striatopallidal pathway reduced reacquisition of alcohol seeking-measured either by the number of active nosepokes emitted or by the number of alcohol rewards earned and consumed. Moreover, optogenetic excitation of the AcbC -> VP striatopallidal pathway increased magazine entries during reacquisition test. This finding shows the importance of the AcbC -> VP pathway in controlling relapse when the drug reinforcer is present on test and is consistent with a role for the AcbC -> VP pathway in regulating the hedonic or incentive motivational properties of drug reinforcers. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Psychological Association; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Alcoholism](#)
[*Neural Pathways](#)
[*Drug Seeking](#)
[Afferent Pathways](#)
[Nucleus Accumbens](#)
[Rats](#)
[Reinforcement](#)
[Relapse \(Disorders\)](#)

Source: PsycINFO

16. Adenosine 2a receptors modulate reward behaviours for methamphetamine.

Citation: Addiction Biology, January 2015(No Pagination Specified), 1355-6215;1369-1600 (Jan 22, 2015)

Author(s): Chesworth, Rose; Brown, Robyn M; Kim, Jee Hyun; Ledent, Catherine; Lawrence, Andrew J

Abstract: Abstract Addiction to methamphetamine (METH) is a global health problem for which there are no approved pharmacotherapies. The adenosine 2A (A2A) receptor presents a potential therapeutic target for METH abuse due to its modulatory effects on striatal dopamine and glutamate transmission. Notably, A2A receptor signalling has been implicated in the rewarding effects of alcohol, cocaine and opiates; yet, the role of this receptor in METH consumption and seeking is essentially unknown. Therefore, the current study used A2A knockout (KO) mice to assess the role of A2A in behaviours

relevant to METH addiction. METH conditioned place preference was absent in A2A KO mice compared with wild-type (WT) littermates. Repeated METH treatment produced locomotor sensitization in both genotypes; however, sensitization was attenuated in A2A KO mice in a dose-related manner. METH intravenous self-administration was intact in A2A KO mice over a range of doses and schedules of reinforcement. However, the motivation to self-administer was reduced in A2A KO mice. Regression analysis further supported the observation that the motivation to self-administer METH was reduced in A2A KO mice even when self-administration was similar to WT mice. Sucrose self-administration was also reduced in A2A KO mice but only at higher schedules of reinforcement. Collectively, these data suggest that A2A signalling is critically required to integrate rewarding and motivational properties of both METH and natural rewards. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Wiley* in [Addiction Biology](#)

17. Common single nucleotide variants underlying drug addiction: More than a decade of research.

Citation: *Addiction Biology*, January 2015(No Pagination Specified), 1355-6215;1369-1600 (Jan 21, 2015)

Author(s): Buhler, Kora-Mareen; Gine, Elena; Echeverry-Alzate, Victor; Calleja-Conde, Javier; de Fonseca, Fernando Rodriguez; Lopez-Moreno, Jose Antonio

Abstract: Abstract Drug-related phenotypes are common complex and highly heritable traits. In the last few years, candidate gene (CGAS) and genome-wide association studies (GWAS) have identified a huge number of single nucleotide polymorphisms (SNPs) associated with drug use, abuse or dependence, mainly related to alcohol or nicotine. Nevertheless, few of these associations have been replicated in independent studies. The aim of this study was to provide a review of the SNPs that have been most significantly associated with alcohol-, nicotine-, cannabis- and cocaine-related phenotypes in humans between the years of 2000 and 2012. To this end, we selected CGAS, GWAS, family-based association and case-only studies published in peer-reviewed international scientific journals (using the PubMed/MEDLINE and Addiction GWAS Resource databases) in which a significant association was reported. A total of 371 studies fit the search criteria. We then filtered SNPs with at least one replication study and performed meta-analysis of the significance of the associations. SNPs in the alcohol metabolizing genes, in the cholinergic gene cluster CHRNA5-CHRNA3-CHRNA4, and in the DRD2 and ANNK1 genes, are, to date, the most replicated and significant gene variants associated with alcohol- and nicotine-related phenotypes. In the case of cannabis and cocaine, a far fewer number of studies and replications have been reported, indicating either a need for further investigation or that the genetics of cannabis/cocaine addiction are more elusive. This review brings a global state-of-the-art vision of the behavioral genetics of addiction and collaborates on formulation of new hypothesis to guide future work. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Wiley* in [Addiction Biology](#)

18. Sex differences in spiritual coping, forgiveness, and gratitude before and after a basic alcohol addiction treatment program.

Citation: Journal of Religion and Health, January 2015(No Pagination Specified), 0022-4197;1573-6571 (Jan 20, 2015)

Author(s): Charzynska, Edyta

Correspondence Address: Charzynska, Edyta: Department of Psychology, University of Social Sciences and Humanities, Chodakowska 19/31, Warsaw, Poland, 03-815, echarzynska@swps.edu.pl

Institution: Department of Psychology, University of Social Sciences and Humanities, Warsaw, Poland

Abstract: The aim of the study was to examine the sex differences in the initial level of spiritual coping, forgiveness, and gratitude and changes occurring in these areas during a basic alcohol addiction treatment program. The study involved 112 persons, including 56 women and 56 men, who started and completed a basic alcohol addiction treatment program at day care units of 11 treatment centers. Two measurements were taken: one in the first week of the treatment, and one in the last week (5th-7th week after baseline). The Spiritual Coping Questionnaire, the Forgiveness Scale, and Gratitude Questionnaire were used. When starting the therapy, women had a higher level of negative spiritual coping ($p = .024$) and a lower level of forgiveness of others ($p = .041$) than men. During the therapy, positive changes in spiritual coping occurred in both sex groups, although in the case of women they involved improvements in more domains and they were stronger. The increase in the level of moral values (except for self-forgiveness) was noted solely in women. The study reveals the need to take sex differences into consideration when introducing spiritual elements into the therapy. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

19. The impact of digital media on health: Children's perspectives.

Citation: International Journal of Public Health, January 2015(No Pagination Specified), 1661-8556;1661-8564 (Jan 20, 2015)

Author(s): Smahel, David; Wright, Michelle F; Cernikova, Martina

Correspondence Address: Smahel, David: Faculty of Social Studies, Masaryk University, Jostova 10, Brno, Czech Republic, 60200, smahel@fss.muni.cz

Institution: Faculty of Social Studies, Masaryk University, Brno, Czech Republic; Faculty of Social Studies, Masaryk University, Brno, Czech Republic; Faculty of Social Studies, Masaryk University, Brno, Czech Republic

Abstract: Objectives: Previous research has mainly focused on the effects of excessive digital media use or overuse on the health of children, primarily utilizing quantitative designs. More research should be conducted on general populations of children, rather than focusing exclusively on excessive technology users. This qualitative study describes technology's impact on physical and mental health from children's perspectives. Methods: Focus groups and interviews were conducted with children between the ages of 9 and 16 in 9 European countries (N = 368). During focus groups and interviews, researchers asked what children perceive as being potentially negative or problematic while using the internet and technology. Results: In this study, children reported several physical and mental health problems without indicating internet addiction or overuse. Physical health symptoms included eye problems, headaches, not eating, and tiredness. For mental health symptoms, children reported cognitive salience of online events, aggression, and sleeping problems. Sometimes they reported these problems within 30 min of technology usage. This suggests that even shorter time usage can cause self-reported health problems for some children. Conclusions: Qualitative methodology helps to understand what children's perspectives are concerning the impact of digital media on health. We recommend future studies focused on average technology users and low technology users to determine whether average levels of technology usage relate to health problems of children. Parents

and teachers should also be informed about the possible physical and mental health issues associated with children's average usage of technology. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Swiss School of Public Health; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

20. Differences in methylphenidate abuse rates among methadone maintenance treatment patients in two clinics.

Citation: Journal of Substance Abuse Treatment, December 2014(No Pagination Specified), 0740-5472 (Dec 30, 2014)

Author(s): Peles, Einat; Schreiber, Shaul; Linzy, Shirley; Domani, Yoav; Adelson, Miriam

Abstract: Methylphenidate, an amphetamine-like prescription medication for attention deficit hyperactivity disorder (ADHD) was suspected as being abused among methadone maintenance treatment (MMT) patients. We tested its presence in the routine urine monitoring of all patients in both Tel Aviv and Las Vegas MMT clinics. Data on demographic and addiction history, ADHD (Wender Utah Rating Scale), cognitive impairment (Mini Mental State Exam), and lifetime DSM-IV-TR psychiatric diagnosis from admission were retrieved, and retention following 6months. None of the 190 patients in Las Vegas tested positive for methylphenidate, while 14.7% (45/306) did in Tel Aviv. Abusers were less educated ($p=0.01$), had higher ADHD scores ($p=0.02$), lower cognitive scores ($p=0.05$), and a higher benzodiazepine (BDZ) abuse rate ($p<0.0005$), with no difference in age, gender, duration in MMT, cannabis, opiates, and cocaine abuse and infectious disease. Of the methylphenidate abuse 42.2% have take-home methadone dose privileges. Not like opiate use, being methylphenidate positive did not relate to 6-months retention. Compared to Tel Aviv, Las Vegas patients were more educated, with lower BDZ, and cocaine abuse. The greater abuse of methylphenidate among ADHD subjects might indicate their using it as self-medication, raising a possible indication for its prescription for that subgroup of MMT patients. The high rate of methylphenidate abuse in Israel needs future study. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from Elsevier in [Journal of Substance Abuse Treatment](#)

21. Has psychiatry tamed the "ketamine tiger?" considerations on its use for depression and anxiety.

Citation: Progress in Neuro-Psychopharmacology & Biological Psychiatry, January 2015(No Pagination Specified), 0278-5846 (Jan 10, 2015)

Author(s): Rasmussen, Keith G

Abstract: Ketamine has been available for approximately 50years as an anesthetic agent. It is known to have potent effects on the central nervous system glutamatergic system, in particular blockade of N-methyl-d-aspartate (NMDA) receptors. Based upon pre-clinical evidence of involvement of the glutamatergic system in mood disorders, studies have been undertaken to test the antidepressant properties of ketamine. Several well-controlled studies, along with open-label case series, have established that ketamine can have rapid antidepressant effects. Additionally, data exist showing benefits of ketamine in post-traumatic stress disorder as well as obsessive compulsive disorder. However, improvements in these conditions tend to be short-lived with single infusions of ketamine. Of concern, ketamine has been associated with neurotoxicity in pre-clinical rodent models and is well-known to cause psychotomimetic effects and addiction in humans. While ketamine has been proven safe for use in sub-anesthetic doses administered once or a few times, the safety profile of prolonged use has not been established. Aspects of safety,

possible mechanisms of action, and future directions of ketamine research are discussed in addition to the clinical literature on its use in psychiatric conditions. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in *Progress in Neuro-Psychopharmacology and Biological Psychiatry*; Note: ; Collection notes: Academic-License. Please note search only titles within the trial dates: 2010 - to-date

22. Discontinuation of buprenorphine maintenance therapy: Perspectives and outcomes.

Citation: Journal of Substance Abuse Treatment, December 2014(No Pagination Specified), 0740-5472 (Dec 30, 2014)

Author(s): Bentzley, Brandon S; Barth, Kelly S; Back, Sudie E; Book, Sarah W

Abstract: Buprenorphine maintenance therapy (BMT) is increasingly the preferred opioid maintenance agent due to its reduced toxicity and availability in an office-based setting in the United States. Although BMT has been shown to be highly efficacious, it is often discontinued soon after initiation. No current systematic review has yet investigated providers' or patients' reasons for BMT discontinuation or the outcomes that follow. Hence, provider and patient perspectives associated with BMT discontinuation after a period of stable buprenorphine maintenance and the resultant outcomes were systematically reviewed with specific emphasis on pre-buprenorphine-taper parameters predictive of relapse following BMT discontinuation. Few identified studies address provider or patient perspectives associated with buprenorphine discontinuation. Within the studies reviewed providers with residency training in BMT were more likely to favor long term BMT instead of detoxification, and providers were likely to consider BMT discontinuation in the face of medication misuse. Patients often desired to remain on BMT because of fear of relapse to illicit opioid use if they were to discontinue BMT. The majority of patients who discontinued BMT did so involuntarily, often due to failure to follow strict program requirements, and 1 month following discontinuation, rates of relapse to illicit opioid use exceeded 50% in every study reviewed. Only lower buprenorphine maintenance dose, which may be a marker for attenuated addiction severity, predicted better outcomes across studies. Relaxed BMT program requirements and frequent counsel on the high probability of relapse if BMT is discontinued may improve retention in treatment and prevent the relapse to illicit opioid use that is likely to follow BMT discontinuation. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in *Journal of Substance Abuse Treatment*

23. The BDNF p.Val66Met polymorphism, childhood trauma, and brain volumes in adolescents with alcohol abuse.

Citation: BMC Psychiatry, December 2014, vol./is. 14/, 1471-244X (Dec 16, 2014)

Author(s): Dalvie, Shareefa; Stein, Dan J; Koenen, Karestan; Cardenas, Valerie; Cuzen, Natalie L; Ramesar, Raj; Fein, George; Brooks, Samantha J

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Institution: MRC/UCT Human Genetics Research Unit, Division of Human Genetics, Institute of Infectious Disease and Molecular Medicine, Faculty of Health Sciences, University of Cape Town, Observatory, South Africa; Department of Psychiatry and Mental Health,

University of Cape Town, Observatory, South Africa; Mailman School of Public Health, Columbia University, New York, NY, US; Neurobehavioral Research Inc, Honolulu, HI, US; Department of Psychiatry and Mental Health, University of Cape Town, Observatory, South Africa; MRC/UCT Human Genetics Research Unit, Division of Human Genetics, Institute of Infectious Disease and Molecular Medicine, Faculty of Health Sciences, University of Cape Town, Observatory, South Africa; Neurobehavioral Research Inc, Honolulu, HI, US; Department of Psychiatry and Mental Health, University of Cape Town, Observatory, South Africa

Language:

English

Abstract:

Background: Previous studies have indicated that early life adversity, genetic factors and alcohol dependence are associated with reduced brain volume in adolescents. However, data on the interactive effects of early life adversity, genetic factors (e.g. p.Met66 allele of BDNF), and alcohol dependence, on brain structure in adolescents is limited. We examined whether the BDNF p.Val66Met polymorphism interacts with childhood trauma to predict alterations in brain volume in adolescents with alcohol use disorders (AUDs). **Methods:** We examined 160 participants (80 adolescents with DSM-IV AUD and 80 age- and gender-matched controls) who were assessed for trauma using the Childhood Trauma Questionnaire (CTQ). Magnetic resonance images were acquired for a subset of the cohort (58 AUD and 58 controls) and volumes of global and regional structures were estimated using voxel-based morphometry (VBM). Samples were genotyped for the p.Val66Met polymorphism using the TaqMan Assay. Analysis of covariance (ANCOVA) and post-hoc t-tests were conducted using SPM8 VBM. **Results:** No significant associations, corrected for multiple comparisons, were found between the BDNF p.Val66Met polymorphism, brain volumes and AUD in adolescents with childhood trauma. **Conclusions:** These preliminary findings suggest that the BDNF p.Met66 allele and childhood trauma may not be associated with reduced structural volumes in AUD. Other genetic contributors should be investigated in future studies. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication:

HOLDER: Dalvie et al.; licensee BioMed Central.; YEAR: 2014

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Alcoholism
 *Brain Size
 *Emotional Trauma
 *Trauma
 *Brain Derived Neurotrophic Factor
 Early Experience
 Genetics

Source:

PsycINFO

Full Text:Available from *National Library of Medicine* in *BMC Psychiatry*Available from *BioMedCentral* in *BMC Psychiatry*Available from *ProQuest* in *BMC Psychiatry*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.**24. Delay discounting and the use of mindful attention versus distraction in the treatment of drug addiction: A conceptual review.****Citation:**

Journal of the Experimental Analysis of Behavior, January 2015, vol./is. 103/1(234-248), 0022-5002;1938-3711 (Jan 2015)

Author(s):

Ashe, Melinda L; Newman, Michelle G; Wilson, Stephen J

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Institution:

Pennsylvania State University, PA, US; Pennsylvania State University, PA, US; Pennsylvania State University, PA, US

Language:

English

Abstract: In recent decades, researchers have integrated measurements of delay discounting, how the subjective valuation of a reward changes as a function of time, into their study of addiction. Research has begun to explore the idea that delay discounting may serve as both a marker for the effectiveness of existing treatments for addiction and a potential target for novel intervention strategies. As this work is in its infancy, many potentially significant connections between the construct of delay discounting and the treatment of addiction have yet to be explored. Here, we present a conceptual review highlighting novel points of intersection between delay discounting and two approaches to treating addiction that have become increasingly popular in recent years: those that focus on the development of mindfulness skills and those that emphasize the use of distraction techniques. Viewing these two techniques through the lens of delay discounting is particularly intriguing because of the very different way that they address the experience of drug cravings in the present moment (nonjudgmentally attending to vs. shifting attention away from subjective cravings, respectively). We propose that these opposing strategies for dealing with cravings may interact with delay discounting in ways that have important implications for treatment effectiveness. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Distraction](#)
[*Drug Addiction](#)
[*Drug Rehabilitation](#)
[*Mindfulness](#)
[*Delay Discounting](#)

Source: PsycINFO

25. Accurate characterization of delay discounting: A multiple model approach using approximate Bayesian model selection and a unified discounting measure.

Citation: Journal of the Experimental Analysis of Behavior, January 2015, vol./is. 103/1(218-233), 0022-5002;1938-3711 (Jan 2015)

Author(s): Franck, Christopher T; Koffarnus, Mikhail N; House, Leanna L; Bickel, Warren K

Correspondence Address: Franck, Christopher T.: Virginia Tech University, 213 A Hutcheson Hall, Blacksburg, VA, US, 24061-0439, chfranck@vt.edu

Institution: Department of Statistics, Virginia Tech University, VA, US; Addiction Recovery Center, Virginia Tech Carillion Research Institute, VA, US; Department of Statistics, Virginia Tech University, VA, US; Addiction Recovery Center, Virginia Tech Carillion Research Institute, VA, US

Language: English

Abstract: The study of delay discounting, or valuation of future rewards as a function of delay, has contributed to understanding the behavioral economics of addiction. Accurate characterization of discounting can be furthered by statistical model selection given that many functions have been proposed to measure future valuation of rewards. The present study provides a convenient Bayesian model selection algorithm that selects the most probable discounting model among a set of candidate models chosen by the researcher. The approach assigns the most probable model for each individual subject. Importantly, effective delay 50 (ED50) functions as a suitable unifying measure that is computable for and comparable between a number of popular functions, including both one- and two-parameter models. The combined model selection/ED50 approach is illustrated using empirical discounting data collected from a sample of 111 undergraduate students with models proposed by Laibson (1997); Mazur (1987); Myerson & Green (1995); Rachlin (2006); and Samuelson (1937). Computer simulation suggests that the proposed Bayesian model selection approach outperforms the single model approach when data truly arise from multiple models. When a single model underlies all participant data, the simulation suggests that the proposed approach fares no worse than the single model approach. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Delay of Gratification](#)
[*Models](#)
[*Delay Discounting](#)
[Monetary Rewards](#)

Source: PsycINFO

26. Change in delay discounting and substance reward value following a brief alcohol and drug use intervention.

Citation: Journal of the Experimental Analysis of Behavior, January 2015, vol./is. 103/1(125-140), 0022-5002;1938-3711 (Jan 2015)

Author(s): Dennhardt, Ashley A; Yurasek, Ali M; Murphy, James G

Correspondence Address: Dennhardt, Ashley A.: The University of Memphis, 202 Psychology Building Memphis, Memphis, TN, US, 38152, apedersn@memphis.edu

Institution: University of Memphis, Memphis, TN, US; University of Memphis, Memphis, TN, US; University of Memphis, Memphis, TN, US

Language: English

Abstract: The present study examined (1) the impact of a brief substance use intervention on delay discounting and indices of substance reward value (RV), and (2) whether baseline values and posttreatment change in these behavioral economic variables predict substance use outcomes. Participants were 97 heavy drinking college students (58.8% female, 41.2% male) who completed a brief motivational intervention (BMI) and then were randomized to one of two conditions: a supplemental behavioral economic intervention that attempted to increase engagement in substance-free activities associated with delayed rewards (SFAS) or an Education control (EDU). Demand intensity, and Omax, decreased and elasticity significantly increased after treatment, but there was no effect for condition. Both baseline values and change in RV, but not discounting, predicted substance use outcomes at 6-month follow-up. Students with high RV who used marijuana were more likely to reduce their use after the SFAS intervention. These results suggest that brief interventions may reduce substance reward value, and that changes in reward value are associated with subsequent drinking and drug use reductions. High RV marijuana users may benefit from intervention elements that enhance future time orientation and substance-free activity participation. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Drinking Patterns](#)
[*Delay of Gratification](#)
[*Rewards](#)
[*Group Intervention](#)
[Alcohol Drinking Attitudes](#)
[Drug Rehabilitation](#)
[Drug Usage](#)
[Delay Discounting](#)

Source: PsycINFO

27. Nicotine deprivation, temporal discounting and choice consistency in heavy smokers.

Citation: Journal of the Experimental Analysis of Behavior, January 2015, vol./is. 103/1(62-76), 0022-5002;1938-3711 (Jan 2015)

Author(s): Roewer, Imme; Wiehler, Antonius; Peters, Jan

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Institution: Department of Systems Neuroscience, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; Department of Systems Neuroscience, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; Department of Systems Neuroscience, University Medical Center Hamburg-Eppendorf, Hamburg, Germany

Language: English

Abstract: The subjective value of rewards declines the longer rewards are delayed into the future ("delay discounting"). Discounting behavior varies both as a function of an individual's trait and current state. The degree of discounting has repeatedly been associated with relapse following treatment of addiction. Therefore, the effects of acute drug deprivation on discounting processes are potentially of high clinical relevance. In two testing sessions (24 hr of nicotine deprivation vs. normal smoking) 37 heavy smoking participants made choices between immediate and delayed rewards as well as between shorter and longer delayed rewards. We found no evidence for an effect of nicotine deprivation on delay discounting of potentially real monetary rewards in both types of decision tasks. Although choice stochasticity was numerically increased after deprivation, this effect was not significant ($p > .1$). Participants responded significantly slower after nicotine deprivation. Our study supports previous findings that choice impulsivity as measured using discounting tasks is not affected by nicotine deprivation, at least not if real monetary rewards of lower amounts are at stake. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Decision Making](#)
[*Nicotine](#)
[*Rewards](#)
[*Tobacco Smoking](#)
Addiction
Drug Withdrawal
Delay Discounting

Source: PsycINFO

28. Separation, dependence and depression in adolescence.

Original Title: Separation, dependance et depression a l'adolescence.

Citation: Agora: Estudos em Teoria Psicanalitica, July 2014, vol./is. 17/Spec Iss(111-126), 1516-1498;1809-4414 (Jul-Dec 2014)

Author(s): Marty, Francois

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Institution: EA 4056, Universite Paris, Paris, France

Language: Portuguese

Abstract: Addiction is a step, provisional but necessary for the psychological constitution of the subject. This is one of the forms of relation without which there can be no autonomy. But dependency also reflects a pathological condition in the process of adolescence where the ability to play with the object is replaced by the need to find an object which fills, as well as masks the distress of the subject and its difficulty to be separated. We establish the hypothesis that the pathological dependency is a way to fight against depression and its underlying anxiety of collapse. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Anxiety](#)
[*Drug Dependency](#)
[*Major Depression](#)
[*Separation Reactions](#)
Psychology

Source: PsycINFO

29. Dependence and adolescence: The refusal of the difference.

Original Title: Dependencia e adolescencia: a recusa da diferenca.

Citation: Agora: Estudos em Teoria Psicanalitica, July 2014, vol./is. 17/Spec Iss(63-74), 1516-1498;1809-4414 (Jul-Dec 2014)

Author(s): Cardoso, Marta Rezende

Correspondence Address: Cardoso, Marta Rezende, rezendecardoso@ig.com.br

Institution: Instituto de Psicologia, UFRJ, Rio de Janeiro, Brazil

Language: Portuguese

Abstract: This article is dedicated to the problem of psychic dependence in adolescence from two angles: the relationship of self/other and the polarity interiority/exteriority. The experience of separation from the object is implied in this passage from childhood to adult life, central part of the issue of dependence, particularly in the addictions. It is intended to show the paradoxical character of the separation process in adolescence, its primary and Oedipal core, on whose entanglement lies the foundation of its impasses. Pathological dependence is remarkable nowadays. In search of absolute pleasure, the subject tends to find himself or herself in a situation of isolation which can be disguised by the establishment of a passionate link to the object. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Dependency \(Personality\)](#)
[*Relationship Quality](#)

Source: PsycINFO

30. The abuse of toxic substances in adolescence: An attempt to incorporate the object?

Original Title: O abuso de substancias toxicas na adolescencia: uma tentativa de incorporacao do objeto?

Citation: Agora: Estudos em Teoria Psicanalitica, July 2014, vol./is. 17/Spec Iss(51-62), 1516-1498;1809-4414 (Jul-Dec 2014)

Author(s): Zornig, Silvia Maria Abu-Jamra

Correspondence Address: Zornig, Silvia Maria Abu-Jamra, silvia.zornig@terra.com.br

Institution: Programa de Pos-Graduacao em Psicologia, Clinica da PUC-Rio, Brazil

Language: Portuguese

Abstract: This paper aims at discussing the role of the object in adolescence through a clinical vignette where the relationships to the objects are done through an incorporative fashion that prevents the access to the experiences of introjection and symbolization. Even if adolescence is defined by some psychoanalysts as a logic moment of subjective appropriation and confrontation to castration and finitude, this paper attempts to emphasize the importance of the "live" companionship of the analyst in order to open the path toward the libidinal investment of the void without annihilation anxiety. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Drug Abuse](#)
[*Psychoanalysis](#)
[Introjection](#)
[Symbolism](#)

Source: PsycINFO

31. Drugs, performance and psychiatrization in the contemporary world.

Original Title: Drogas, performance e psiquiatrizacao na contemporaneidade.

Citation: Agora: Estudos em Teoria Psicanalitica, July 2014, vol./is. 17/Spec Iss(23-37), 1516-1498;1809-4414 (Jul-Dec 2014)

Author(s): Birman, Joel

Correspondence Address: Birman, Joel, joelbirman@uol.com.br

Institution: Instituto de Psicologia, UFRJ, Rio de Janeiro, Brazil

Language: Portuguese

Abstract: The aiming of this paper is to establish the relationships between the use of drugs today and the performance in the social space, as well as showing that this process is reached through legal and illegal drugs. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Performance](#)
[*Psychiatry](#)

Source: PsycINFO

32. Borderline, teenagers, cannabis and cocaine.

Original Title: Etat limite, adolescence, cannabis et cocaine.

Citation: Agora: Estudos em Teoria Psicanalitica, July 2014, vol./is. 17/Spec Iss(11-22), 1516-1498;1809-4414 (Jul-Dec 2014)

Author(s): Luru, Didier

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Institution: CMPP Etienne Marcel, Paris, France

Language: Portuguese

Abstract: Teenagers are fond of psychoactive products. Some of them, according to their personality, go to the limits of their psychic structure. In the practical field, we can often observe the revealing of borderline states, very different from the usual problematic teenagers. Psychoactive substances, used for the first time as anxiolytics, become quickly a cause of anxiety, therefore revealing the subjects in borderline states. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Borderline States](#)
[*Cannabis](#)
[*Cocaine](#)
[*Drug Usage](#)

Source: PsycINFO

33. Health promotion interventions and policies addressing excessive alcohol use: A systematic review of national and global evidence as a guide to health-care reform in China.

Citation: Addiction, January 2015, vol./is. 110/Suppl 1(68-78), 0965-2140;1360-0443 (Jan 2015)

Author(s): Li, Qing; Babor, Thomas F; Zeigler, Donald; Xuan, Ziming; Morisky, Donald; Hovell, Melbourne F; Nelson, Toben F; Shen, Weixing; Li, Bing

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Institution: Michigan State University, Department of Epidemiology and Biostatistics, East Lansing, MI, US; University of Connecticut Health Center, Department of Community Medicine and Health Care, Farmington, CT, US; University of Illinois at Chicago, School of Public Health, Center for Global Health, Chicago, IL, US; Boston University, School of Public

Health, Department of Community Health Sciences, Boston, MA, US; University of California, Los Angeles, Fielding School of Public Health, Department of Community Health Sciences, Los Angeles, CA, US; San Diego State University, Graduate School of Public Health, Center for Behavioral Epidemiology and Community Health, San Diego, CA, US; University of Minnesota, School of Public Health, Division of Epidemiology and Community Health, Minneapolis, MN, US; Tsinghua University, School of Law, Center for Health Law Research, Beijing, China; Peking University, Sixth Hospital, Institute of Mental Health, Beijing, China

Language:

English

Abstract:

Aims: Steady increases in alcohol consumption and related problems are likely to accompany China's rapid epidemiological transition and profit-based marketing activities. We reviewed research on health promotion interventions and policies to address excessive drinking and to guide health-care reform. **Methods:** We searched Chinese- and English-language databases and included 21 studies in China published between 1980 and 2013 that covered each policy area from the World Health Organization (WHO) Global Strategy to Reduce the Harmful Use of Alcohol. We evaluated and compared preventive interventions to the global alcohol literature for cross-national applicability. **Results:** In contrast with hundreds of studies in the global literature, 11 of 12 studies from mainland China were published in Chinese; six of 10 in English were on taxation from Taiwan or Hong Kong. Most studies demonstrated effectiveness in reducing excessive drinking, and some reported the reduction of health problems. Seven were randomized controlled trials. Studies targeted schools, drink-driving, work-places, the health sector and taxation. **Conclusions:** China is the world's largest alcohol market, yet there has been little growth in alcohol policy research related to health promotion interventions over the past decade. Guided by a public health approach, the WHO Global Strategy and health reform experience in Russia, Australia, Mexico and the United States, China could improve its public health response through better coordination and implementation of surveillance and evidence-based research, and through programmatic and legal responses such as public health law research, screening and early intervention within health systems and the implementation of effective alcohol control strategies. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Conference Information:

Alcohol Policy 16: Building Blocks for Sound Alcohol Policies. Apr, 2013. Washington, DC, US. Preliminary findings from this study were presented at the aforementioned conference and Alcohol Policy 15: Policies for Reducing Problems Associated with Alcohol Availability, Washington DC, December 2010, Harvard America-China Health Summit, Boston, September 2011 and American Public Health Association Annual Meeting, Washington DC, November 2011.

Country of Publication:

HOLDER: Society for the Study of Addiction; YEAR: 2014

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Alcoholism
 *Health Promotion
 *Intervention
 *Health Care Policy
 *Health Care Reform
 Alcohol Abuse
 Public Health
 Global Health

Source:

PsycINFO

Full Text:Available from *Wiley* in [Addiction](#)**34. Factors associated with depression and anxiety among patients attending community-based methadone maintenance treatment in China.****Citation:**

Addiction, January 2015, vol./is. 110/Suppl 1(51-60), 0965-2140;1360-0443 (Jan 2015)

Author(s):

Yin, Wenyuan; Pang, Lin; Cao, Xiaobin; McGoogan, Jennifer M; Liu, Michael; Zhang, Congbin; Li, Zhijun; Li, Jianhua; Rou, Keming

Correspondence Address: Yin, Wenyuan: National Center for AIDS/STD Control and Prevention, Chinese Center for Disease Control and Prevention, 155 Changbai Road, Changping District, Beijing, China, 102206, yinwy928928@163.com

Institution: National Center for AIDS/STD Control and Prevention, China CDC, Beijing, China; National Center for AIDS/STD Control and Prevention, China CDC, Beijing, China; National Center for AIDS/STD Control and Prevention, China CDC, Beijing, China; National Center for AIDS/STD Control and Prevention, China CDC, Beijing, China; National Center for AIDS/STD Control and Prevention, China CDC, Beijing, China; Yunnan Institute of Drug Abuse, Kunming, China; US CDC Global AIDS Program (GAP), Beijing, China; Yunnan Institute of Drug Abuse, Kunming, China; National Center for AIDS/STD Control and Prevention, China CDC, Beijing, China

Language: English

Abstract: Aim: To estimate the prevalence of, and identify factors associated with, depression and anxiety among community-based methadone maintenance treatment (MMT) clients in China. Design: A cross-sectional survey. Setting: Nine MMT clinics, three each from three Chinese provinces (Yunnan, Anhui and Jiangsu) between October 2008 and February 2009. Participants: A total of 1301 MMT clients. Measurements: A questionnaire, including the Zung Self-Rating Depression Scale (SDS) and Zung Self-Rating Anxiety Scale (SAS), and on-site urine drug testing. Findings The prevalence of depression (SDS score > 53) and anxiety (SAS score > 50) in our sample was 38.3% [95% confidence interval (CI) = 35.7, 40.9] and 18.4% (95% CI = 16.3, 20.5), respectively, with 14.2% (95% CI = 12.3, 16.1) displaying symptoms of both. Sample prevalence rates for depression [mean = 49.69, standard deviation (SD) = 10.34] and anxiety (mean = 40.98, SD = 10.66) were higher than the national average for each ($t(0.05/2, 1300) = 19.2, P < 0.001$ and $t(0.05/2, 1300) = 8.0, P < 0.001$, respectively). Employing multi-level modelling techniques, gender ($P = 0.03$) and employment status ($P < 0.001$) were found to be associated significantly with depression in a single-level model; however, in a multi-level mixed model, only employment status ($P < 0.001$) was associated with depression. Gender ($P = 0.03$), education level ($P = 0.02$), marital status ($P = 0.04$), employment status ($P < 0.001$), positive urine drug test results ($P = 0.02$) and daily methadone dose ($P < 0.001$) were found to be associated significantly with anxiety in a single-level model, while only employment status ($P < 0.01$) and positive results for the urine drug test ($P = 0.04$) were associated with anxiety in a multi-level mixed model. Conclusions: A considerable proportion of methadone maintenance treatment clients in China have experienced depression and anxiety during treatment. There is a need to provide tailored mental health interventions for this high-risk population. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Anxiety](#)
[*Community Services](#)
[*Maintenance Therapy](#)
[*Major Depression](#)
[*Methadone Maintenance](#)
[Drug Usage](#)
[Patients](#)
[Zungs Self Rating Depression Scale](#)

Source: PsycINFO

Full Text: Available from *Wiley* in [Addiction](#)

35. Predictors of accessing antiretroviral therapy among HIV-positive drug users in China's National Methadone Maintenance Treatment Programme.

Citation: Addiction, January 2015, vol./is. 110/Suppl 1(40-50), 0965-2140;1360-0443 (Jan 2015)

Author(s): Zhao, Yan; Shi, Cynthia X; McGoogan, Jennifer M; Rou, Keming; Zhang, Fujie; Wu, Zunyou

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Language: English

Abstract: Aims: The objective of this study was to examine factors that predict antiretroviral therapy (ART) access among eligible, HIV-positive methadone maintenance treatment (MMT) clients. We also tested the hypothesis that sustained MMT participation increases the likelihood of accessing ART. Design: A nation-wide cohort study conducted from 1 March 2004 to 31 December 2011. Setting: MMT clients were followed from the time of their enrolment in China's national MMT programme until their death or the study end date. Participants: Our cohort comprised 7111 ART-eligible, HIV-positive MMT clients, 49.2% of whom remained ART-naïve and 50.8% of whom received ART. Measurements: Demographic variables, drug use history, MMT programme participation and HIV-related clinical characteristics of study participants who remained naïve to ART and those who accessed ART were compared by univariate and multivariable analysis. Findings: Predictors of accessing ART among this cohort included being retained in MMT at the time of first meeting ART eligibility [adjusted odds ratio (AOR) = 1.84, confidence interval (CI) = 1.54-2.21, $P < 0.001$] compared to meeting ART eligibility before entering MMT (AOR = 0.98, CI = 0.80-1.21, $P = 0.849$) or previously entering MMT and dropping out before meeting ART eligibility. Additional predictors were $CD4 < 200$ cells/ μ l when ART-eligibility requirement was first met (AOR = 1.81, CI = 1.61-2.05, $P < 0.001$ compared to $CD4 = 201-350$ cells/ μ l), and being in a stable partner relationship (married/cohabitating: AOR = 1.14, CI = 1.01-1.28, $P = 0.030$). Conclusions: Retained participation in methadone maintenance treatment increases the likelihood that eligible clients will access antiretroviral therapy. These results highlight the potential benefit of colocalization of methadone maintenance treatment and antiretroviral therapy services in a 'one-stop-shop' model. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Antiviral Drugs](#)
[*Drug Therapy](#)
[*Health Care Utilization](#)
[*HIV](#)
[*Methadone Maintenance](#)
[Drug Usage](#)
[Heroin](#)
[Prediction](#)

Source: PsycINFO

Full Text: Available from *Wiley* in [Addiction](#)

36. HIV epidemic among drug users in China: 1995-2011.

Citation: *Addiction*, January 2015, vol./is. 110/Suppl 1(20-28), 0965-2140;1360-0443 (Jan 2015)

Author(s): Wang, Lan; Guo, Wei; Li, Dongmin; Ding, Zhengwei; McGoogan, Jennifer M; Wang, Ning; Wu, Zunyou; Wang, Lu; China National HIV/AIDS Surveillance Program, China

- Citation:** Addiction, January 2015, vol./is. 110/Suppl 1(11-19), 0965-2140;1360-0443 (Jan 2015)
- Author(s):** Bao, Yan-Ping; Liu, Zhi-Min; Li, Jian-Hua; Zhang, Rui-Min; Hao, Wei; Zhao, Min; Shi, Jie; McGoogan, Jennifer M; Lu, Lin
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- Language:** English
- Abstract:** Aim: To investigate the characteristics of the different club drugs and associated high-risk sexual behaviours in China. Design: Multicentre cross-sectional study. Setting: Drug Detoxification and Rehabilitation Centres in six provinces, China. Participants: A total of 1434 eligible club drug users were included. Measurements: Participants were investigated by trained interviewers using a self-designed structured questionnaire to collect information on club drug use and associated behaviours. Findings: Methamphetamine was the most commonly abused drug in participants (73.92%), who used it in their or their friends' homes by non-injection for the purpose of feeling euphoria. Among participants with sexual behaviours after club drug use, 75.21% reported having engaged in sex with multiple partners after club drug use during the past year and 79.84% had unprotected sex after using club drug during the past year. A two-level logistic model showed that male gender [adjusted odds ratio (AOR) = 7.14; 95% confidence interval (CI) = 4.17-12.5], unmarried (AOR = 1.71, 95% CI = 1.04-2.79), long duration of club drug use during their life-time (AOR = 1.76, 95% CI = 1.28-2.42) and severe acute intoxication after using club drugs during the past year (AOR = 2.11, 95% CI = 1.07-4.15) were independent risk factors of multiple sex partners during the past year. Another two-level model showed that the club drug users who were female (AOR = 1.79, 95% CI = 1.03-3.11) and had polydrug use during their lifetime (AOR = 1.55, 95% CI = 1.01-2.34) had more risk for unprotected sex during the past year than without these characteristics. Conclusion: High-risk sexual behaviours are common among club drug users in China. The prevention and intervention of club drug use could decrease the risk of sexual behaviours which further prevent HIV transmission and other sexually transmitted infections in China. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Clubs \(Social Organizations\)](#)
[*Drug Abuse](#)
[*Psychosexual Behavior](#)
[*Risk Factors](#)
[Drug Rehabilitation](#)
[Methamphetamine](#)
[Sexually Transmitted Diseases](#)
- Source:** PsycINFO
- Full Text:** Available from *Wiley* in [Addiction](#)

38. Tracking the evolution of drug abuse in China, 2003-10: A retrospective, self-controlled study.

Citation: Addiction, January 2015, vol./is. 110/Suppl 1(4-10), 0965-2140;1360-0443 (Jan 2015)

- Author(s):** Jia, Zhongwei; Liu, Zhiming; Chu, Ping; McGoogan, Jennifer M; Cong, Minchao; Shi, Jie; Lu, Lin
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- Institution:** National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Center for AIDS/STD Control and Prevention, Chinese Center for Disease Control and Prevention, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China
- Language:** English
- Abstract:** Aim: To characterize trends in drug abuse in China before and after the 2005 initiation of the 'People's War on Drugs'. Design: Retrospective self-controlled study. Setting: Annual, nation-wide surveillance from 2003 to 2010 of all registered drug users in China's National Surveillance System on Drug Abuse (NSSDA). Participants: A total of 1 184 124 drug users registered in NSSDA were involved in this study and were classified into three groups based on registered dates-pre-war group (n = 230 278) registered 2003-04, phase I group (n = 518 651) registered 2005-07 and phase II group (n = 435 195) registered 2008-10. Measurements: Indicators included proportions of:(i) new and relapsed drug users, (ii) heroin and synthetic drug users among new users, (iii) people aged 35 years or younger and (iv) women. Comparisons were made across groups using annual data to describe temporal trends. Findings: Between 2003 and 2010 the proportion of heroin users decreased by 52.3% and synthetic drugs use increased 860.7% among new users, while a 12.8% decrease in the proportion of heroin users and a 918.8% increase in synthetic drug use in all users was detected. Compared with the pre-war group, the proportion of relapsed users decreased 2.6% and 29.1% in the phase I and phase II groups, respectively, but a significant increase in the proportion of new users was found in phase I (OR = 1.24, CI = 1.15-1.35, p < 0.0001), followed by an apparent decrease in phase II compared with phase I (OR = 0.75, CI = 0.70-0.80, p < 0.0001). Similarly, the proportion of heroin users decreased 15.1 and 24.2% among new drug users in phase I and phase II in comparison with the pre-war group. Conclusion: The decrease in proportions of drug users in China between 2003/4 and 2008/10 may suggest some positive influence of the 'People's War on Drugs', especially in the decreased proportion of relapsed users. In contrast, there was a rapid increase in new synthetic drug use over the same period. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Abuse](#)
[*Epidemiology](#)
[*History](#)
[Age Differences](#)
[Heroin](#)
[Human Females](#)
[Relapse \(Disorders\)](#)
[Trends](#)
[Chronological Age](#)
- Source:** PsycINFO
- Full Text:** Available from *Wiley* in [Addiction](#)
- 39. Towards ending HIV/AIDS among drug users in China.**
- Citation:** *Addiction*, January 2015, vol./is. 110/Suppl 1(1-3), 0965-2140;1360-0443 (Jan 2015)
- Author(s):** Wu, Zunyou; Wang, Yu; Detels, Roger; Bulterys, Marc

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Institution: National Center for AIDS/STD Control and Prevention, Chinese Center for Disease Control and Prevention, Beijing, China; Chinese Center for Disease Control and Prevention, Beijing, China; Department of Epidemiology, UCLA School of Public Health, Los Angeles, CA, US; Global AIDS Program, US Centers for Disease Control and Prevention, Beijing, China

Language: English

Abstract: This editorial discusses the prevention of HIV among drug users in China. China has made remarkable progress in scaling-up harm reduction programs. However, both the drug use and HIV epidemics among drug users have evolved during the past decade, calling for new approaches. This special issue of *Addiction* assembles a collection of papers which describe the changing landscape of drug use and the HIV epidemic, underscoring the need to further expand access to antiretroviral therapy (ART) and quality long-term HIV care for drug users in China. Since identifying the initial outbreak, HIV prevalence among injecting drug users (IDUs) in China has declined considerably due to effective, large-scale interventions. These successes offer an example to other affected areas, particularly in rapidly scaling-up interventions for addicted populations in limited resource settings. China must build on the innovative, pragmatic and scalable solutions that defined the initial epidemic response in order to continue reducing infection among drug users, and ultimately ending HIV/AIDS in these groups. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: HOLDER: Society for the Study of Addiction; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*AIDS Prevention](#)
[*Harm Reduction](#)
[*Intravenous Drug Usage](#)
[*Scientific Communication](#)

Source: PsycINFO

Full Text: Available from *Wiley* in [Addiction](#)

40. Sugar withdrawal and differential reinforcement of low rate (DRL) performance in rats.

Citation: *Physiology & Behavior*, February 2015, vol./is. 139/(468-473), 0031-9384 (Feb 2015)

Author(s): Mangabeira, Victor; Garcia-Mijares, Miriam; Silva, M. Teresa A

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Institution: Experimental Psychology Department, Institute of Psychology, University of Sao Paulo, Sao Paulo, Brazil; Experimental Psychology Department, Institute of Psychology, University of Sao Paulo, Sao Paulo, Brazil; Experimental Psychology Department, Institute of Psychology, University of Sao Paulo, Sao Paulo, Brazil

Language: English

Abstract: Sugar consumption is assumed to induce a behavioral state that is similar to the one provoked by addictive substances. Drug withdrawal increases impulsivity, assessed by differential reinforcement of low rate (DRL) performance. The present study investigated the effect of withdrawal from a prolonged period of sugar consumption on DRL performance. Water-deprived rats were trained under a DRL 20s (DRL 20) schedule. The animals were allowed to choose between plain water and a sucrose solution (E group) or water only (C group) for 30 days. The sucrose solution was then removed, and measures of DRL 20 performance were obtained on 3 consecutive days. Results showed that DRL performance in the C group improved after sugar withdrawal, whereas performance in the E group led to the loss of reinforcers. An analysis of variance-type analysis showed that the E group had higher response rates per reinforcer, lower IRTs, and greater differences between baseline and abstinence than the C group after 3 days of sugar withdrawal. Thus, sugar abstinence after a relatively long consumption period resulted in impairment of

DRL performance, confirming the parallel effects of addictive drugs and sugar and suggesting an increase in impulsivity as a consequence of sugar deprivation. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Differential Reinforcement](#)
[*Sugars](#)
[Behavioral Sciences](#)
[Rats](#)
Source: PsycINFO
Full Text: Available from *Elsevier* in [Physiology and Behavior](#)

41. The oxytocin receptor impairs ethanol reward in mice.

Citation: Physiology & Behavior, February 2015, vol./is. 139/(321-327), 0031-9384 (Feb 2015)
Author(s): Bahi, Amine
Correspondence Address: Bahi, Amine: Nebraska-Lincoln, College of Arts & Sciences, Psychology Department, Burnett Hall 238, Lincoln, NE, US, 68588, abahi2@unl.edu
Institution: Department of Anatomy, College of Medicine & Health Sciences, United Arab Emirates University, Al Ain, United Arab Emirates
Language: English
Abstract: It is well established that oxytocin, and its receptor (OxtR), play a crucial role in addiction and that the stimulation of oxytocin neurotransmission reduces addictive behaviors to ethanol in laboratory animals. However, the impact of OxtR modulation on acquisition, extinction and reinstatement of drug-elicited ethanol-conditioned place preference (EtOH-CPP) has not yet been investigated. In this study, we evaluated the effects of OxtR pharmacological modulation, using the oxytocin analog Carbetocin, and genetic overexpression in the nucleus accumbens (NAcc), using lentiviral-mediated gene transfer technology, of the OxtR on acquisition, extinction and reinstatement of drug-elicited EtOH-CPP in mice. In the first experiment, results showed that Carbetocin administration and NAcc OxtR-overexpression (LV-OxtR) reduced EtOH-CPP establishment. In the second experiment, systemic Carbetocin treatment and OxtR overexpression resulted in decreased time spent in the ethanol-paired compartment following completion of a 7-day extinction protocol. Finally, the third experiment showed that Carbetocin and LV-OxtR suppressed primed reinstatement of EtOH-CPP. It is concluded that pharmacological and genetic modulation of the OxtR can modulate the acquisition, extinction, and reinstatement of conditioned reinforcing effects of ethanol. Taken together, the current findings add to the growing literature on oxytocin neurotransmission modulation in the pharmacotherapy of ethanol addiction and alcoholism. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Ethanol](#)
[*Neurotransmission](#)
[*Oxytocin](#)
[*Reinstatement](#)
[Mice](#)
Source: PsycINFO
Full Text: Available from *Elsevier* in [Physiology and Behavior](#)

42. Individual differences in gene expression of vasopressin, D2 receptor, POMC and orexin: Vulnerability to relapse to heroin-seeking in rats.

Citation: Physiology & Behavior, February 2015, vol./is. 139/(127-135), 0031-9384 (Feb 2015)

Author(s): Zhou, Yan; Leri, Francesco; Cummins, Erin; Kreek, Mary Jeanne

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Institution: Laboratory of the Biology of Addictive Diseases, Rockefeller University, New York, NY, US; Department of Psychology, University of Guelph, Guelph, ON, Canada; Department of Psychology, University of Guelph, Guelph, ON, Canada; Laboratory of the Biology of Addictive Diseases, Rockefeller University, New York, NY, US

Language: English

Abstract: Individual vulnerability to stress-induced relapse during abstinence from chronic heroin exposure is a key feature of opiate addiction, with limited studies on this topic. Arginine vasopressin (AVP) and its V1b receptor, components of the brain stress responsive systems, play a role in heroin-seeking behavior triggered by foot shock (FS) stress in rats. In this study, we tested whether individual differences in the FS-induced heroin-seeking were associated with alterations of AVP and V1b, as well as other stress responsive systems, including pro-opiomelanocortin (POMC), orexin, plasma ACTH and corticosterone, as well as dopamine D2 receptor (D2) and plasma prolactin. Sprague-Dawley rats were subjected to 3-hour intravenous heroin self-administration (SA) and then tested in extinction, and FS-induced and heroin priming-induced reinstatements. The rats that self-administered heroin were divided into high and low reinstatement responders induced by FS (H-RI; L-RI). Over SA sessions, both the H-RI and L-RI displayed similar active lever responding, heroin infusion and total heroin intake. Compared to the L-RI, however, the H-RI showed greater active lever responses during stress-induced reinstatement, with higher AVP mRNA levels in medial/basolateral amygdala and lower D2 mRNA levels in caudate putamen. However, heroin priming resulted in similar reinstatement in both groups and produced similarly low POMC and high orexin mRNA levels in hypothalamus. Our results indicate that: 1) enhanced amygdalar AVP and reduced striatal D2 expression may be related to individual vulnerability to stress-induced reinstatement of heroin-seeking; and 2) heroin abstinence-associated alterations of hypothalamic orexin and POMC expression may be involved in drug priming-induced heroin-seeking. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Amygdala](#)
[*Heroin](#)
[*Individual Differences](#)
[*Vasopressin](#)
[*Orexin](#)
[Rats](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [Physiology and Behavior](#)

43. Effects of treadmill running exercise during the adolescent period of life on behavioral deficits in juvenile rats induced by prenatal morphine exposure.

Citation: Physiology & Behavior, February 2015, vol./is. 139/(26-33), 0031-9384 (Feb 2015)

Author(s): Ahmadalipour, Ali; Rashidy-Pour, Ali

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Institution: Laboratory of Learning and Memory, Research Center and Department of Physiology, School of Medicine, Semnan University of Medical Sciences, Semnan, Iran; Laboratory of Learning and Memory, Research Center and Department of Physiology, School of Medicine, Semnan University of Medical Sciences, Semnan, Iran

Language: English

Abstract: Prenatal exposure to morphine throughout pregnancy results in an array of prolonged or permanent neurochemical and behavioral deficits, including deficits in learning and memory in children of addicted mothers. This study investigated the effects of forced exercise on behavioral deficits of pups born to mothers addicted to morphine in rats. After mating and ensuring of pregnancy of female Wistar rats, they were divided into morphine or saline groups and in the second half of pregnancy (on days 11-18 of gestation) were injected subcutaneously with morphine or saline, respectively. Pups were weaned at postnatal day (PND) 21 and trained at mild intensity on a treadmill 20 days. On PND 41-47, the behavioral responses were studied. Light/dark (L/D) box and elevated plus maze (EPM) apparatus were used for investigation of anxiety, shuttle box and forced swimming tests were used to assess passive avoidance learning and memory and depression behavior, respectively. The results showed that prenatal morphine exposure caused reductions in time spent in light compartment of L/D box and EPM open arm, while postnatal exercise reversed these effects. We also found that prenatal morphine exposure caused a reduction in step through latency in passive avoidance memory test and exercise counteracted with this effect. Performance in the forced swimming test did not affected by prenatal morphine exposure or postnatal exercise. Exercise seems to be one of the strategies in reduction of behavioral deficits of children born to addicted mothers to morphine. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Exercise](#)
[*Morphine](#)
[*Prenatal Exposure](#)
[Animal Learning](#)
[Rats](#)
[Running](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [Physiology and Behavior](#)

44. Voluntary alcohol consumption and plasma beta-endorphin levels in alcohol preferring rats chronically treated with lamotrigine.

Citation: Physiology & Behavior, February 2015, vol./is. 139/(7-12), 0031-9384 (Feb 2015)

Author(s): Zalewska-Kaszubska, Jadwiga; Bajer, Bartosz; Gorska, Dorota; Andrzejczak, Dariusz; Dyr, Wanda; Bienkowski, Przemyslaw

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 Department of Pharmacology and Physiology of the Nervous System, Institute of Psychiatry and Neurology, Warsaw, Poland; Department of Pharmacology and Physiology of the Nervous System, Institute of Psychiatry and Neurology, Warsaw, Poland

Language: English

Abstract: Several recent studies have indicated that lamotrigine, similarly to other antiepileptic drugs, may be useful in the therapy of alcohol dependence. The rationale for using lamotrigine in the treatment of alcohol addiction is based on its multiple mechanisms of action which include inhibition of voltage-sensitive sodium channels, modulation voltage-gated calcium currents and transient potassium outward current. However, the known mechanism of lamotrigine does not fully explain its efficacy in alcohol addiction therapy. For this reason we have decided to examine the effect of lamotrigine on the opioid system. Our previous studies showed that topiramate and levetiracetam (antiepileptic drugs) as well as the most effective drugs in alcohol addiction therapy i.e.

naltrexone and acamprosate, when given repeatedly, all increased plasma beta endorphin (an endogenous opioid peptide) level, despite operating through different pharmacological mechanisms. It is known that low beta-endorphin level is often associated with alcohol addiction and also that alcohol consumption elevates the level of this peptide. This study aims to assess the effect of repeated treatment with lamotrigine on voluntary alcohol intake and beta-endorphin plasma level in alcohol preferring rats (Warsaw high preferring (WHP) rats). We observed a decrease in alcohol consumption in rats treated with lamotrigine. However we didn't observe significant changes in beta-endorphin level during withdrawal of alcohol, which may indicate that the drug does not affect the opioid system. We suppose that lamotrigine may be useful in alcohol dependence therapy and presents a potential area for further study. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohols](#)
[*Drugs](#)
[*Endorphins](#)
[Addiction](#)
[Rats](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [Physiology and Behavior](#)

45. Increased drug seizures in Hatay, Turkey related to civil war in Syria.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(116-118), 0955-3959 (Jan 2015)

Author(s): Arslan, M. Mustafa; Zeren, Cem; Celikel, Adnan; Ortanca, Ibrahim; Demirkiran, Sumeyra

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Language: English

Abstract: Presents a study which aims to document the potential effects of the Syrian Civil War and related refugee movements, on the number of illicit drug seizures in the area of Hatay. From 2008 to 2013, 810 illicit drug seizures were recorded, of amounts ranging from milligrams to thousands of kilograms. The seizures comprised 447 cannabis plants, 292 cannabis herb, 50 captagon, 26 amounts of heroin and two amounts of cocaine. The average number of indictments per year between 2008 and 2010 was 67. By 2011, after the conflict in Syria had begun, this number rose to 123, representing an increase of 84% from the previous year. Seizures continued to rise in 2012 and in 2013 these declined slightly to 211, although this was still far higher than in pre-conflict years. The amount per indictment also increased. For example, while the number of indictments for cannabis plants in 2011 was not significantly higher than the average for the previous three years, the amount seized was 145% higher. In 2012 the number of indictments was almost three times greater and the amount seized was 13 times more than the average amount seized in the pre-conflict period. In 2013, there were seven more indictments than in 2012 and the amount seized was 16 times higher than the average for 2008, 2009 and 2010. Heroin and cocaine are not as commonly seized in Hatay. In the period of civil war heroin seizures reached their highest level in 2012 with the seizure of 121,049 g. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Conference Information: IAFS 2014. Oct, 2014. Seoul. Korea. This study is planned to be presented at the aforementioned conference.

Country of Publication: HOLDER: Elsevier B.V.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Usage
 *Refugees
 *Seizures
 *Social Movements
 *War
Source: PsycINFO
Full Text: Available from *Elsevier* in *International Journal of Drug Policy*

46. Addiction surplus: The add-on margin that makes addictive consumptions difficult to contain.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(107-111), 0955-3959 (Jan 2015)
Author(s): Adams, Peter J; Livingstone, Charles
Correspondence Address: Adams, Peter J.: School of Population Health, University of Auckland, Private Bag 92019, Auckland, New Zealand, p.adams@auckland.ac.nz
Institution: Center for Addiction Research, University of Auckland, Auckland, New Zealand; School of Public Health and Preventive Medicine, Monash University, VIC, Australia
Language: English
Abstract: Addictive consumptions generate financial surpluses over-and-above non-addictive consumptions because of the excessive consumption of addicted consumers. This add-on margin or 'addiction surplus' provides a powerful incentive for beneficiaries to protect their income by ensuring addicted consumers keep consuming. Not only that, addiction surplus provides the financial base that enables producers to sponsor activities which aim to prevent public health initiatives from reducing consumption. This paper examines the potency of addiction surplus to engage industry, governments and communities in an on-going reliance on addiction surplus. It then explores how neo-liberal constructions of a rational consumer disguise the ethical and exploitative dynamics of addiction surplus by examining ways in which addictive consumptions fail to conform to notions of autonomy and rationality. Four measures are identified to contain the distorting effects of addiction surplus. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
 *Drug Addiction
 *Tobacco Smoking
 Economics
 Gambling
 Independence (Personality)
 Rationality
Source: PsycINFO
Full Text: Available from *Elsevier* in *International Journal of Drug Policy*

47. Perceptions of genetic testing and genomic medicine among drug users.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(100-106), 0955-3959 (Jan 2015)
Author(s): Perlman, David C; Gelpi-Acosta, Camila; Friedman, Samuel R; Jordan, Ashly E; Hagan, Holly
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Language: English

Abstract: Background: Genetic testing will soon enter care for human immunodeficiency virus (HIV) and hepatitis C virus (HCV), and for addiction. There is a paucity of data on how to disseminate genetic testing into healthcare for marginalized populations. We explored drug users' perceptions of genetic testing. Methods: Six focus groups were conducted with 34 drug users recruited from syringe exchange programmes and an HIV clinic between May and June 2012. Individual interviews were conducted with participants reporting previous genetic testing. Results: All participants expressed acceptance of genetic testing to improve care, but most had concerns regarding confidentiality and implications for law enforcement. Most expressed more comfort with genetic testing based on individual considerations rather than testing based on race/ethnicity. Participants expressed comfort with genetic testing in medical care rather than drug treatment settings and when specifically asked permission, with peer support, and given a clear rationale. Conclusion: Although participants understood the potential value of genetic testing, concerns regarding breaches in confidentiality and discrimination may reduce testing willingness. Safeguards against these risks, peer support, and testing in medical settings based on individual factors and with clear rationales provided may be critical in efforts to promote acceptance of genetic testing among drug users. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Genetic Testing](#)
[*Genome](#)
[*Health Attitudes](#)
[*Medical Sciences](#)
[HIV](#)
[Minority Groups](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [International Journal of Drug Policy](#)

48. Nod and wave: An Internet study of the codeine intoxication phenomenon.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(67-77), 0955-3959 (Jan 2015)

Author(s): Van Hout, Marie Claire

Correspondence Address: Van Hout, Marie Claire, mcvanhout@wit.ie

Institution: School of Health Sciences, Waterford Institute of Technology, Waterford, Ireland

Language: English

Abstract: Background: The non-medical use of pharmaceutical opioids such as codeine is of increasing public health concern. The aim of the study was to describe codeine intoxication experiences amongst recreational drug users, as posted on public Internet forums. Methods: Internet searches were carried out by using the specific key word 'codeine' and in combination with 'experience', 'report', 'trip' and 'forum'. 96 Trip reports and 156 thread discussions relating to the sole use of codeine were analysed using the empirical phenomenological psychological (EPP) method. Nine themes and 72 categories emerged. Results: Narratives illustrated transitions between medical and non-medical use of codeine for dulling of emotional and/or physical pain, opiate withdrawal management and for intoxication. Codeine's appeal centred on access via family medicine cabinets, prescribers and pharmacies. Discussion and dissemination of indigenous harm reduction tactics included the learning to appreciate codeine's effect via moderated use in optimal

settings, avoidance of tolerance by use of informed dosing schedules, cold water extraction of codeine, and using codeine as an alternative to stronger opioids. Oral and rectal routes were favoured, with awareness on forums of the harms of intravenous and subcutaneous injection. 250mg was recommended to optimise recreational outcomes. Forum users describe potentiating practices and using over-the-counter medications to improve intoxication experiences and reduce unpleasant side effects. Dissociative effects, ability to ignore physical and emotional pain, codeine induced synaesthesia and altered states of consciousness were described. Overdose was characterised by anaesthesia, severe chest and stomach pain, respiratory depression, panic and fear of death. Conclusion: Efforts to ensure legitimate codeine use for pain and reduction of aberrant behaviours centre on evidence based screening, risk minimisation, prescription monitoring and specific treatment protocols. This study shows that internet drug forums drive communal knowhow and indigenous harm reduction strategies, and warrant consideration as viable public health mechanisms for informing users. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Codeine](#)
[*Drug Usage](#)
[*Internet](#)
[*Side Effects \(Drug\)](#)
[*Toxic Disorders](#)
[Harm Reduction](#)
[Life Experiences](#)
[Phenomenology](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [International Journal of Drug Policy](#)

49. Prevalence and correlates of nonmedical prescription opioid use among a cohort of sex workers in Vancouver, Canada.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(59-66), 0955-3959 (Jan 2015)

Author(s): Argento, Elena; Chettiar, Jill; Nguyen, Paul; Montaner, Julio; Shannon, Kate

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Language: English

Abstract: Background: The nonmedical use of prescription opioids (POs) is a major public health concern, causing extensive morbidity and mortality in North America. Canada has the second highest consumption rate of POs globally and data indicate nonmedical PO use (NPOU) is growing among key populations and increasingly available in street-level drug markets. Despite accumulating evidence documenting the rise of NPOU, few studies have systematically examined NPOU in Canada among key vulnerable populations, such as sex workers. This study prospectively evaluated the prevalence and correlates of NPOU within a Vancouver cohort of sex workers over three-years follow-up. Methods: Data were drawn from an open prospective cohort, AESHA (An Evaluation of Sex Workers Health Access) in Metro Vancouver, Canada (2010-2013). Women were recruited through outreach from outdoor street locations and indoor venues. Bivariate and multivariable logistic regression using Generalized Estimating Equations (GEE) were used to examine

social and structural correlates of NPOU over 36 months. Results: Of the 692 sex workers at baseline, close to one-fifth (n = 130, 18.8%) reported NPOU (injection or non-injection) in the last six months. In multivariable GEE analyses, factors independently correlated with recent NPOU were: exchanging sex while high (AOR 3.26, 95%CI 2.29-4.64), police harassment/arrest (AOR 1.83, 95%CI 1.43-2.35), intimate partner injects drugs (AOR 1.66, 95%CI 1.11-2.49), and recent physical/sexual intimate partner violence (AOR 1.65, 95%CI 1.21-2.24). Conclusion: Our results demonstrate that nearly one-fifth of sex workers in Metro Vancouver report NPOU. Factors independently statistically associated with NPOU included exchanging sex while high, police harassment/arrest, a drug injecting intimate partner and recent physical/sexual intimate partner violence. The high prevalence of NPOU use among sex workers underscores the need for further prevention and management strategies tailored to this key population. The correlates of NPOU uncovered here suggest that structural interventions may be further implemented to ameliorate this growing concern. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Opiates](#)
[*Prescription Drugs](#)
[*Prostitution](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [International Journal of Drug Policy](#)

50. "It's Russian roulette": Adulteration, adverse effects and drug use transitions during the 2010/2011 United Kingdom heroin shortage.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(51-58), 0955-3959 (Jan 2015)

Author(s): Harris, Magdalena; Forseth, Kirsten; Rhodes, Tim

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Institution: Centre for Research on Drugs and Health Behaviour, London School of Hygiene and Tropical Medicine, London, United Kingdom; Centre for Research on Drugs and Health Behaviour, London School of Hygiene and Tropical Medicine, London, United Kingdom; Centre for Research on Drugs and Health Behaviour, London School of Hygiene and Tropical Medicine, London, United Kingdom

Language: English

Abstract: Background: Between late 2010 and mid 2011 there was a significant heroin shortage in the United Kingdom (UK), resulting in a rapid drop in street heroin purity and increase in price. The most well documented event of this kind is the 2000-2001 Australian heroin shortage, with little published research addressing the UK context. In this paper we draw on qualitative data to explore the impact of, and responses to, the 2010/2011 shortage among London-based heroin users. Methods: Data collection comprised longitudinal life history and narrative interviews with 37 PWID in 2010-2011. The average age of participants was 40, with a 20-year average duration of injecting. Heroin was the drug of choice for the majority of participants (25), with 12 preferring to inject a crack-cocaine and heroin mix. Recruitment took place through London drug and alcohol services and peer networks. Results: The majority of participants continued to source and inject heroin despite reported decline in purity and increased adulteration. Transitions to poly-drug use during the heroin shortage were also common, increasing vulnerability to overdose and other drug related harms. Participants enacted indigenous harm reduction strategies in attempting to manage changes in drug purity and availability, with variable success. Conclusion: Epidemiological data gathered during periods of heroin shortage is often drawn on to emphasise the health benefits of reductions in supply. Our findings highlight

the importance of understanding the ways in which heroin shortages may increase, as well as reduce, harm. There is a need for enhanced service provision during periods of drug shortage as well as caution in regard to the posited benefits of supply-side drug law enforcement. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Conference Information: EMCDDA Trendspotter Meeting. 2011. Lisbon. Portugal. A version of this paper was first presented at the aforementioned conference.

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Heroin](#)
[*Side Effects \(Drug\)](#)
[Harm Reduction](#)
[Qualitative Research](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [International Journal of Drug Policy](#)

51. How do drug market changes affect characteristics of injecting initiation and subsequent patterns of drug use? Findings from a cohort of regular heroin and methamphetamine injectors in Melbourne, Australia.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(43-50), 0955-3959 (Jan 2015)

Author(s): Horyniak, Danielle; Stoove, Mark; Degenhardt, Louisa; Aitken, Campbell; Kerr, Thomas; Dietze, Paul

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Institution: Centre for Population Health, Burnet Institute, Melbourne, VIC, Australia; Centre for Population Health, Burnet Institute, Melbourne, VIC, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Randwick, NSW, Australia; Centre for Population Health, Burnet Institute, Melbourne, VIC, Australia; Urban Health Research Initiative, British Columbia Centre for Excellence in HIV/AIDS, Vancouver, BC, Canada; Centre for Population Health, Burnet Institute, Melbourne, VIC, Australia

Language: English

Abstract: Background: Changes in drug market characteristics have been shown to affect drug use patterns but few studies have examined their impacts on injecting initiation experiences and subsequent patterns of injecting drug use (IDU). Methods: We collected data on self-reported injecting initiation experiences and past-month patterns of IDU from 688 regular heroin and methamphetamine injectors in Melbourne, Australia, who initiated injecting across three different drug market periods (prior to the Australian heroin shortage ('high heroin')/immediately following the shortage ('low heroin')/'contemporary' markets (fluctuating heroin and methamphetamine availability)). We used univariable and multivariable logistic regression to examine the relationship between period of injecting initiation and first drug injected, and multinomial logistic regression for the relationship between period of injecting initiation and current injecting patterns. Results: 425 participants (62%) reported initiating injecting in the high heroin period, 146 (21%) in the low heroin period, and 117 (17%) in the contemporary period. Participants who initiated injecting during the low heroin period were twice as likely to initiate injecting using a drug other than heroin (AOR: 1.94, 95% CI: 1.27-2.95). The most common patterns of drug use among study participants in the month preceding interview were polydrug use (44%) and primary heroin use (41%). Injecting initiation period was either non-significantly or weakly associated with current drug use pattern, which was more strongly associated with other socio-demographic and drug use characteristics, particularly self-reported drug of choice. Conclusion: The drug market period in which injecting initiation occurred influenced the first drug injected and influenced some aspects of subsequent drug use. In the context of highly dynamic drug markets in which polydrug use is common there is a need for broad harm reduction and drug treatment services

which are flexible and responsive to changing patterns of drug use. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Heroin](#)
[*Injections](#)
[*Methamphetamine Marketing](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in *International Journal of Drug Policy*

52. Geographic variability in HIV and injection drug use in Ukraine: Implications for integration and expansion of drug treatment and HIV care.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(37-42), 0955-3959 (Jan 2015)

Author(s): Zaller, Nickolas; Mazhnaya, Alonya; Larney, Sarah; Islam, Zahed; Shost, Alyona; Prokhorova, Tatiana; Rybak, Natasha; Flanigan, Timothy

Correspondence Address: Zaller, Nickolas: University of Arkansas for Medical Sciences, College of Public Health, Little Rock, AR, US, NDZaller@uams.edu

Institution: Miriam Hospital, Providence, RI, US; International HIV/AIDS Alliance, Kiev, Ukraine; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; International HIV/AIDS Alliance, Kiev, Ukraine; International HIV/AIDS Alliance, Kiev, Ukraine; International HIV/AIDS Alliance, Kiev, Ukraine; Miriam Hospital, Providence, RI, US; Miriam Hospital, Providence, RI, US

Language: English

Abstract: Background: Ukraine has the highest HIV burden of any European country with much of the current HIV epidemic concentrated among people who inject drugs (PWIDs) and their sexual partners. Opiate substitution therapy (OST) is limited in Ukraine and expansion of OST is urgently needed to help stem the tide of the HIV epidemic. Methods: We accessed publicly available data in Ukraine in order to explore geographic variability with respect to prevalence of HIV, PWIDs and OST programmes. Results: The regions of Ukraine with the largest number of opioid dependent persons (the south and eastern portions of the country) correspond to the regions with the highest HIV prevalence and HIV incidence. The number of opioid PWIDs per 100,000 population as well as the number of all OST treatment slots per 100,000 varied significantly across the three HIV prevalence categories. Overall, the proportion of individuals receiving either methadone maintenance therapy (MMT) or buprenorphine maintenance therapy (BMT) was quite low: average across categories: 7.3% and 0.4%, respectively. Additionally, less than half of OST patients receiving MMT or BMT were HIV positive patients. Conclusion: There is significant geographic variability in both numbers of HIV positive individuals and numbers of PWIDs across Ukraine, however, there may be a more concentrated epidemic among PWIDs in many regions of the country. Scale up of addiction treatment for PWID, especially OST, can have a significant impact on preventing injection related morbidity, such as HIV and HCV infection. Ukraine can learn from the mistakes other nations have made in denying critical treatment opportunities to PWID. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*AIDS Prevention](#)
[*Drug Therapy](#)
[*Intravenous Drug Usage](#)
[*Opiates](#)
[*Regional Differences](#)

Source: PsycINFO
Full Text: Available from *Elsevier* in *International Journal of Drug Policy*

53. "We are people too": Consumer participation and the potential transformation of therapeutic relations within drug treatment.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(30-36), 0955-3959 (Jan 2015)

Author(s): Rance, Jake; Treloar, Carla

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Institution: Centre for Social Research in Health, UNSW Australia, Sydney, NSW, Australia; Centre for Social Research in Health, UNSW Australia, Sydney, NSW, Australia

Language: English

Abstract: Background: While there is growing recognition of the benefits of user involvement within drug treatment there is scant literature documenting the actual implementation of such initiatives. Nonetheless, the extant research is remarkably consistent in identifying poor relationships between service users and staff as a principal barrier to the successful implementation of consumer participation. Focussing on participants' accounts of change within the 'therapeutic alliance', this paper investigates a consumer participation initiative introduced within three Australian drug treatment services. Methods: In 2012, the New South Wales Users and AIDS Association (NUAA), a state-based drug user organisation, introduced a consumer participation initiative within three treatment facilities across the state. This paper draws on 57 semi-structured interviews with staff and service-user project participants. Approximately ten participants from each site were recruited and interviewed at baseline and six months later at evaluation. Results: The enhanced opportunities for interaction enabled by the consumer participation initiative fostered a sense of service users and staff coming to know one another beyond the usual constraints and limitations of their relationship. Both sets of participants described a diminution of adversarial relations: an unsettling of the 'them and us' treatment divide. The routine separation of users and staff was challenged by the emergence of a more collaborative ethos of 'working together'. Participants noted 'seeing' one another-the other-differently; as people rather than simply an identity category. Conclusion: For service users, the opportunity to have 'a voice' began to disrupt the routine objectification or dehumanisation that consistently, if unintentionally, characterise the treatment experience. Having a voice, it seemed, was synonymous with being human, with having ones' 'humanness' recognised. We contend that not only did the introduction of consumer participation appear to empower service users and enhance the therapeutic alliance, it may have also improved service quality and health outcomes. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Consumer Behavior](#)
[*Drug Therapy](#)
[*Drug Usage](#)
[*Health Care Services](#)
[*Therapeutic Alliance](#)
[Discrimination](#)
[Interviews](#)
[Qualitative Research](#)
[Stigma](#)

Source: PsycINFO
Full Text: Available from *Elsevier* in *International Journal of Drug Policy*

54. Effects of transnational migration on drug use: An ethnographic study of Nepali female Heroin users in Hong Kong.

- Citation:** International Journal of Drug Policy, January 2015, vol./is. 26/1(8-14), 0955-3959 (Jan 2015)
- Author(s):** Tang, Wai-Man
- Correspondence Address:** Tang, Wai-Man: New Asia College, Chinese University of Hong Kong, Room 407 Humanities Building, Shatin, Hong Kong, wyman19@gmail.com
- Institution:** Anthropology Department, Chinese University of Hong Kong, Shatin, Hong Kong
- Language:** English
- Abstract:** Background: Past studies of female drug users in South Asia tend to focus on their plights, for instance, how they have been driven to drug use and encounter more problems than their male counterparts, such as HIV/AIDS and sexual abuse. Few studies focus on their active role-how they actively make use of resources in the external environment to construct their desired femininity through drug consumption. Furthermore, little is known about the situation of female South Asian drug users who are living overseas. This paper is a study of transnational migration, drug use and gender-how transnational migration influences the drug use of female transnational migrants. Methods: An 18-month ethnography has been carried out in a Nepali community in Hong Kong and 13 informants were interviewed. Data were coded and analyzed by using the grounded-theory approach. Themes related to the drug use of the female Nepali heroin users were identified. Results: The findings show that there are three important themes that significantly affect the drug use of female Nepali heroin users, which include (1) their relationships with intimate partners, (2) their means of support, and (3) their legal status in migration. Conclusions: The findings are consistent with the concept of post-structuralism in gender and transnationalism theories. Female Nepali heroin users in Hong Kong are neither active agents nor passive victims; their active/passive role is largely dependent on their reconfigured opportunities and constraints in transnational migration. Thus, transnationalism should be taken as an important perspective to study the situation of female drug users in a globalized context. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Usage](#)
[*Heroin](#)
[*Human Females](#)
[*Human Migration](#)
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in [International Journal of Drug Policy](#)

55. A view from the frontlines in Slavyansk, Ukraine: HIV prevention, drug treatment, and help for people who use drugs in a conflict zone.

- Citation:** International Journal of Drug Policy, January 2015, vol./is. 26/1(6-7), 0955-3959 (Jan 2015)
- Author(s):** Owczarzak, Jill; Karelin, Mikhail; Phillips, Sarah D
- Correspondence Address:** Owczarzak, Jill: Department of Health, Behavior, and Society, Johns Hopkins Bloomberg School of Public Health, 624N. Broadway, Hampton House Room 739, Baltimore, MD, US, 21205-1996, jillowczarzak@jhu.edu
- Institution:** Department of Health, Behavior, and Society, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, US; Nasha Dopomoga, Slavyansk, Ukraine; Department of Anthropology, Indiana University, Bloomington, IN, US
- Language:** English

Abstract: This opinion article discusses HIV prevention, drug treatment, and help for people who use drugs in a conflict zone in Slavyansk, Ukraine. Slavyansk was occupied by pro-Russian forces of the "Donetsk People's Republic" (DPR) from April 12-July 5, 2014, when the Ukrainian army regained control. Slavyansk, along with the still-occupied cities of Donetsk and Luhansk, is in the Donbas, which has the country's highest rates of HIV infection and drug use. To learn how the ongoing conflict has impacted HIV prevention and drug treatment in the conflict zone, the authors interviewed staff of Slavyansk's main HIV-service agency, Nasha Dopomoga ("Our Help"). Even at the height of the shelling, the staff of Nasha Dopomoga tried to provide services to their clients, conducting outreach work such as needle and syringe exchange. Part of the DPR's agenda was to target and stamp out drug use by banishing dealers from Slavyansk and meting out violent punishments to users. Although Slavyansk has been "liberated," supply chains have been disrupted and basic first aid supplies are either unavailable or difficult and dangerous to get. The most devastating effect of the conflict on HIV prevention work is the erosion of trust. The staff at this and other agencies has shown tremendous commitment to their clients and courage to continuing working with them despite various challenges. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*AIDS Prevention](#)
[*Assistance \(Social Behavior\)](#)
[*Conflict](#)
[*Drug Therapy](#)
[*Drug Usage](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [International Journal of Drug Policy](#)

56. International Journal of Drug Policy moves to twelve issues.

Citation: International Journal of Drug Policy, January 2015, vol./is. 26/1(1-2), 0955-3959 (Jan 2015)

Author(s): Stimson, Gerry; Rhodes, Tim

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Institution: Centre for Research on Drugs and Health Behaviour, London School of Hygiene and Tropical Medicine, London, United Kingdom

Language: English

Abstract: This editorial provides an overview of the present issue of International Journal of Drug Policy. The Journal receives an increasing number high quality submissions, which annually have more doubled since 2010. To accommodate this, in 2014, the Journal published larger than usual issues, including combining regular with special issue material. The published pages have increased by 50% on the previous year. On current trends, the Journal will have around 260,000 downloads in 2014; up from 228,000 in 2013. The Journal is also receiving a broader diversity of material, from multiple disciplines in the sciences of addiction, drug use and drug policy, and across a range of global drug policy and substance use concerns. The Journal has secured an important niche in the field of addiction journal publishing. From January 2015, this issue, will increase from six to twelve issues a year. This is a big step, which reflects the Journal's continued growth. Increasing to twelve issues allows for greater flexibility in terms of what gets published and when, speeds up the time from acceptance to publication, and enables the Journal to remain topical. The Journal will retain a balance of regular and special issues, but will consider publishing more "themed" issues in which clusters of 3-6 papers are grouped together. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: HOLDER: Elsevier B.V.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Addiction](#)
[*Drug Rehabilitation](#)
[*Drug Usage](#)
[*Policy Making](#)
[*Scientific Communication](#)
Source: PsycINFO
Full Text: Available from *Elsevier* in *International Journal of Drug Policy*

57. Supportive practice with carers of people with substance misuse problems.

Citation: Practice: Social Work in Action, January 2015, vol./is. 27/1(51-65), 0950-3153;1742-4909 (Jan 2015)
Author(s): Manthorpe, Jill; Moriarty, Jo; Cornes, Michelle
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Institution: King's College London, London, United Kingdom; Social Care Workforce Research Unit, United Kingdom; Social Care Workforce Research Unit, United Kingdom
Language: English
Abstract: While there is increased recognition of the role of family carers in supporting adults with social care needs, some groups of carers are overlooked or hidden from professional view. Carers of people with substance misuse problems may be among this group since they are at risk of feeling guilty and stigmatised; targeting and eligibility criteria may concentrate professionals' activities on people with high levels of need for practical support and there may be complex family dynamics where the role of carer does not fit traditional models. This article draws on a study of carers' workers (professionals whose role entailed a specific remit to work with carers, such as carers support workers) and family carers undertaken in four areas of England. A total of 86 interviews were conducted (late 2011-2012), of which, just over a quarter (26%) involved some discussion of substance misuse. The findings were analysed thematically. The findings from the study were later reported to a focus group of practitioners and carers with experience of drug-and-alcohol support for validation in 2014. Key themes in relation to social work practice with carers of people with alcohol and other drug problems were those of insecure funding of voluntary sector carer services; balancing generic support for family carers and specific support for certain groups of carers; and feelings among carers that the drug-and-alcohol problems experienced by the person they were supporting contributed to them feeling excluded from general carers' support. The article concludes that drug and alcohol social workers should be alert to the implications of the Care Act 2014 and its provision for carers, and that carers' workers should be confident in being able to refer carers to appropriate support in either general or specific settings or raise this as an unmet need if such provision is not adequate locally. Social work trainers and educators should ensure they are working within evidence-based interventions to enhance professional capacity and capability. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: British Association of Social Workers; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Caregivers](#)
[*Drug Abuse](#)
[Alcoholism](#)
[Dementia](#)
[Social Casework](#)
Source: PsycINFO

58. Shame, sexual compulsivity, and eroticizing flirtatious others: An experimental study.

- Citation:** Journal of Sex Research, January 2015, vol./is. 52/1(98-109), 0022-4499;1559-8519 (Jan 2015)
- Author(s):** Petrican, Raluca; Burris, Christopher T; Moscovitch, Morris
- Correspondence Address:** Petrican, Raluca: Rotman Research Institute, 3560 Bathurst Street, Toronto, ON, Canada, M6A 2E1, raluca.petrican@gmail.com
- Institution:** Rotman Research Institute, Toronto, ON, Canada; Department of Psychology, St. Jerome's University, ON, Canada; Department of Psychology, University of Toronto, Rotman Research Institute, Toronto, ON, Canada
- Language:** English
- Abstract:** Clinical observation and correlational studies with nonclinical samples suggest that a linkage between negative affective states (especially shame) and engagement in erotic pursuits typifies sexual compulsivity. The present study tested whether experimental induction of shame leads to increased interest in erotically suggestive targets among more sexually compulsive individuals. A total of 74 age-traditional heterosexual university students first recalled either an emotionally neutral or a shame-inducing personal experience, then completed a nonpredictive gaze-cueing task featuring flirtatious or emotionally neutral faces of the same or opposite sex. They also rated the faces' attractiveness and completed a validated sexual compulsivity scale and two control measures (executive control, sociosexuality). Higher (versus lower) sexual compulsivity predicted weaker gaze-triggered attentional orienting in response to the flirtatious opposite-sex face in the shame (versus neutral) condition, and this was accounted for by (higher) attractiveness ratings of the flirtatious opposite-sex face. Shame thus appears to increase sexualization (i.e., reduces salience of agentic features and increases appeal of physical attributes) of erotically suggestive targets among more sexually compulsive individuals. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: The Society for the Scientific Study of Sexuality
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Eroticism](#)
[*Sexual Addiction](#)
[*Shame](#)
[Heterosexuality](#)
[Human Sex Differences](#)
- Source:** PsycINFO

59. Why academic psychiatry is endangered.

- Citation:** Australian and New Zealand Journal of Psychiatry, January 2015, vol./is. 49/1(9-12), 0004-8674;1440-1614 (Jan 2015)
- Author(s):** Henderson, Scott; Porter, Richard J; Basset, Darryl; Battersby, Malcolm; Baune, Bernhard T; Byrne, Gerard J; Ellis, Pete M; Everall, Ian; Glue, Paul; Hazell, Philip; Hood, Sean D; Kelly, Brian J; Kirkby, Kenneth C; Kissane, David; Luty, Suzanne E; Mellsoy, Graham; Mitchell, Philip B; Mulder, Roger; Raphael, Beverley; Tonge, Bruce; Malhi, Gin S
- Correspondence Address:** Henderson, Scott: National Institute for Mental Health Research, Australian National University, Canberra, ACT, Australia, 0200, ashenderson@netspace.net.au
- Institution:** National Institute for Mental Health Research, Australian National University, Canberra, ACT, Australia; Department of Psychological Medicine, University of Otago-Christchurch, Christchurch, New Zealand; School of Psychiatry and Clinical Neurosciences, University of Western Australia, Perth, WAU, Australia; Flinders University, Bedford Park, SA, Australia; Department of Psychiatry, University of Adelaide, Adelaide, SA, Australia; Academic Discipline of Psychiatry, School of Medicine, University of Queensland, Brisbane, QLD, Australia; Department of

Psychological Medicine, University of Otago-Wellington, Wellington, New Zealand; Department of Psychiatry, University of Melbourne, Parkville, VIC, Australia; Department of Psychological Medicine, University of Otago-Dunedin, Dunedin, New Zealand; Discipline of Psychiatry, Sydney Medical School, University of Sydney, Sydney, NSW, Australia; School of Psychiatry and Clinical Neurosciences, University of Western Australia, Perth, WAU, Australia; Discipline of Psychiatry, School of Medicine and Public Health, Faculty of Health and Medicine, University of Newcastle, Newcastle, NSW, Australia; School of Medicine, University of Tasmania, Hobart, TAS, Australia; Department of Psychiatry, School of Clinical Sciences, Monash Health, Monash University, Clayton, VIC, Australia; Department of Psychological Medicine, University of Otago-Christchurch, Christchurch, New Zealand; Waikato Clinical School, University of Auckland, Auckland, New Zealand; School of Psychiatry, University of New South Wales, Sydney, NSW, Australia; Department of Psychological Medicine, University of Otago-Christchurch, Christchurch, New Zealand; Psychological Medicine, Australian National University, Canberra, ACT, Australia; Centre for Developmental Psychiatry and Psychology, School of Clinical Science, Monash University, Clayton, VIC, Australia; Discipline of Psychiatry, Sydney Medical School, University of Sydney, Sydney, NSW, Australia

Language: English

Abstract: This editorial discusses across the developed world, recruitment into all areas of academic medicine has declined, not least psychiatry. For Australia and New Zealand, this will have a serious impact on undergraduate teaching, on postgraduate training and on our continuing contribution to research. Their response has amply confirmed our concern and encouraged us to seek far-reaching changes. In addition, there is the privileged opportunity to investigate what is unknown but potentially useful. Research can become exhilarating and even addictive, characterised as it is by only intermittent success. If the present cohort of senior academics is not replaced, the consequences need to be anticipated. It is also to be welcomed that the recently established Australian Academy of Health and Medical Sciences is considering what far-reaching initiatives are now needed. Clearly, the resources and influence necessary for success can be marshalled only through an effective coalition. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Medical Sciences](#)
[*Medical Students](#)
[*Postgraduate Training](#)
[*Psychiatry](#)

Source: PsycINFO

Full Text: Available from *Highwire Press* in [Australian and New Zealand Journal of Psychiatry](#)

60. Repeated social stress increases reward salience and impairs encoding of prediction by rat locus coeruleus neurons.

Citation: Neuropsychopharmacology, January 2015, vol./is. 40/2(513-523), 0893-133X;1740-634X (Jan 2015)

Author(s): Chaijale, Nayla N; Snyder, Kevin; Arner, Jay; Curtis, Andre L; Valentino, Rita J

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Language: English

Abstract: Stress is implicated in psychopathology characterized by cognitive dysfunction. Cognitive responses to stress are regulated by the locus coeruleus-norepinephrine (LC-NE) system. As social stress is a prevalent human stressor, this study determined the impact of repeated social stress on the relationship between LC neuronal activity and behavior during the performance of cognitive tasks. Social stress-exposed rats performed better at intradimensional set shifting (IDS) and made fewer perseverative errors during reversal learning (REV). LC neurons of control rats were task responsive, being activated after the choice and before reward. Social stress shifted LC neuronal activity from being task responsive to being reward responsive during IDS and REV. LC neurons of stressed rats were activated by reward and tonically inhibited by reward omission with incorrect choices. In contrast, LC neurons of stress-naïve rats were only tonically inhibited by reward omission. Reward-related LC activation in stressed rats was unrelated to predictability because it did not habituate as learning progressed. The findings suggest that social stress history increases reward salience and impairs processes that compute predictability for LC neurons. These effects of social stress on LC neuronal activity could facilitate learning as indicated by improved performance in stressed rats. However, the ability of social stress history to enhance responses to behavioral outcomes may have a role in the association between stress and addictive behaviors. In addition, magnified fluctuations in LC activity in response to opposing behavioral consequences may underlie volatile changes in emotional arousal that characterize post-traumatic stress disorder. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cognitive Ability](#)
[*Locus Ceruleus](#)
[*Norepinephrine](#)
[*Social Stress](#)
[Rats](#)

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

61. Effects of social interaction and warm ambient temperature on brain hyperthermia induced by the designer drugs methylone and MDPV.

Citation: Neuropsychopharmacology, January 2015, vol./is. 40/2(436-445), 0893-133X;1740-634X (Jan 2015)

Author(s): Kiyatkin, Eugene A; Kim, Albert H; Wakabayashi, Ken T; Baumann, Michael H; Shaham, Yavin

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Institution: Intramural Research Program, NIDA, NIH, Baltimore, MD, US; Intramural Research Program, NIDA, NIH, Baltimore, MD, US

Language: English

Abstract: 3,4-Methylenedioxymethcathinone (methylone) and 3,4-methylenedioxypropylamphetamine (MDPV) are new drugs of abuse that have gained worldwide popularity. These drugs are structurally similar to 3,4-methylenedioxymethamphetamine (MDMA) and share many of its physiological and behavioral effects in humans, including the development of hyperthermia during acute intoxication. Here, we examined the effects of methylone (1-9 mg/kg, s.c.) or MDPV (0.1-1.0 mg/kg, s.c.) on brain temperature homeostasis in rats maintained in a standard laboratory environment (single-housed in a quiet rest at 22

degreeC) and under conditions that model human drug use (social interaction and 29 degreeC ambient temperature). By simultaneously monitoring temperatures in the nucleus accumbens, temporal muscle, and facial skin, we assessed the effects of methylone and MDPV on intra-brain heat production and cutaneous vascular tone, two critical factors that control brain temperature responses. Both methylone and MDPV dose-dependently increased brain temperature, but even at high doses that induced robust locomotor activation, hyperthermia was modest in magnitude (up to ~2 degreeC). Both drugs also induced dose-dependent peripheral vasoconstriction, which appears to be a primary mechanism determining the brain hyperthermic responses. In contrast to the powerful potentiation of MDMA-induced hyperthermia by social interaction and warm ambient temperature, such potentiation was absent for methylone and minimal for MDPV. Taken together, despite structural similarities to MDMA, exposure to methylone or MDPV under conditions commonly associated with human drug use does not lead to profound elevations in brain temperature and sustained vasoconstriction, two critical factors associated with MDMA toxicity. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Body Temperature](#)
[*Brain](#)
[*Drug Usage](#)
[*Methylenedioxymethamphetamine](#)
[*Social Interaction](#)
[Animal Models](#)
[Hyperthermia](#)
[Rats](#)

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

62. Compulsive-like responding for opioid analgesics in rats with extended access.

Citation: Neuropsychopharmacology, January 2015, vol./is. 40/2(421-428), 0893-133X;1740-634X (Jan 2015)

Author(s): Wade, Carrie L; Vendruscolo, Leandro F; Schlosburg, Joel E; Hernandez, Daniel O; Koob, George F

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Language: English

Abstract: The abuse of prescription opioids that are used for the treatment of chronic pain is a major public health concern, costing ~\$53.4 billion annually in lost wages, health-care costs, and criminal costs. Although opioids remain a first-line therapy for the treatment of severe chronic pain, practitioners remain cautious because of the potential for abuse and addiction. Opioids such as heroin are considered very rewarding and reinforcing, but direct and systematic comparisons of compulsive intake between commonly prescribed opioids and heroin in animal models have not yet been performed. In the present study, we evaluated the potential for compulsive-like drug seeking and taking, using intravenous self-administration of oxycodone, fentanyl, and buprenorphine in rats allowed long access

sessions (12 h). We measured compulsive-like intake using an established escalation model and responding on a progressive ratio schedule of reinforcement. We compared the potential for compulsive-like self-administration of these prescription opioids and heroin, which has been previously established to induce increasing intake that models the transition to addiction in humans. We found that animals that self-administered oxycodone, fentanyl, or heroin, but not buprenorphine had similar profiles of escalation and increases in breakpoints. The use of extended access models of prescription opioid intake will help better understand the biological factors that underlie opioid dependence. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Analgesic Drugs](#)
[*Drug Self Administration](#)
[*Opiates](#)
[*Rats](#)
[*Reinforcement](#)
[Fentanyl](#)
[Drug Seeking](#)

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

63. Shared genetic factors influence amygdala volumes and risk for alcoholism.

Citation: Neuropsychopharmacology, January 2015, vol./is. 40/2(412-420), 0893-133X;1740-634X (Jan 2015)

Author(s): Dager, Alecia D; McKay, D. Reese; Kent, Jack W Jr.; Curran, Joanne E; Knowles, Emma; Sprooten, Emma; Goring, Harald H. H; Dyer, Thomas D; Pearlson, Godfrey D; Olvera, Rene L; Fox, Peter T; Lovallo, William R; Duggirala, Ravi; Almasy, Laura; Blangero, John; Glahn, David C

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Institution: Olin Neuropsychiatry Research Center, Institute of Living, Hartford Hospital, Hartford, CT, US; Olin Neuropsychiatry Research Center, Institute of Living, Hartford Hospital, Hartford, CT, US; Department of Genetics, Texas Biomedical Research Institute, San Antonio, TX, US; Department of Genetics, Texas Biomedical Research Institute, San Antonio, TX, US; Olin Neuropsychiatry Research Center, Institute of Living, Hartford Hospital, Hartford, CT, US; Olin Neuropsychiatry Research Center, Institute of Living, Hartford Hospital, Hartford, CT, US; Department of Genetics, Texas Biomedical Research Institute, San Antonio, TX, US; Department of Genetics, Texas Biomedical Research Institute, San Antonio, TX, US; Olin Neuropsychiatry Research Center, Institute of Living, Hartford Hospital, Hartford, CT, US; Department of Psychiatry, University of Texas Health Science Center San Antonio, San Antonio, TX, US; Research Imaging Institute, University of Texas Health Science Center San Antonio, San Antonio, TX, US; Department of Psychiatry, Oklahoma University Heath Science Center, Oklahoma City, OK, US; Department of Genetics, Texas Biomedical Research Institute, San Antonio, TX, US; Department of Genetics, Texas Biomedical Research Institute, San Antonio, TX, US; Department of Genetics, Texas Biomedical Research Institute, San Antonio, TX, US; Olin Neuropsychiatry Research Center, Institute of Living, Hartford Hospital, Hartford, CT, US

Language: English

Abstract: Alcohol abuse and dependence (alcohol use disorders, AUDs) are associated with brain shrinkage. Subcortical structures including the amygdala, hippocampus, ventral striatum, dorsal striatum, and thalamus subserve reward functioning and may be particularly

vulnerable to alcohol-related damage. These structures may also show pre-existing deficits impacting the development and maintenance of AUD. It remains unclear whether there are common genetic features underlying both subcortical volumes and AUD. In this study, structural brain images were acquired from 872 Mexican-American individuals from extended pedigrees. Subcortical volumes were obtained using FreeSurfer, and quantitative genetic analyses were performed in SOLAR. We hypothesized the following: (1) reduced subcortical volumes in individuals with lifetime AUD relative to unrelated controls; (2) reduced subcortical volumes in individuals with current relative to past AUD; (3) in non-AUD individuals, reduced subcortical volumes in those with a family history of AUD compared to those without; and (4) evidence for common genetic underpinnings (pleiotropy) between AUD risk and subcortical volumes. Results showed that individuals with lifetime AUD showed larger ventricular and smaller amygdala volumes compared to non-AUD individuals. For the amygdala, there were no differences in volume between current vs past AUD, and non-AUD individuals with a family history of AUD demonstrated reductions compared to those with no such family history. Finally, amygdala volume was genetically correlated with the risk for AUD. Together, these results suggest that reduced amygdala volume reflects a pre-existing difference rather than alcohol-induced neurotoxic damage. Our genetic correlation analysis provides evidence for a common genetic factor underlying both reduced amygdala volumes and AUD risk. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Brain Size](#)
[*Genetics](#)
[*Mexican Americans](#)
[*Family History](#)
[Alcoholism](#)

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

64. Striatal morphology is associated with tobacco cigarette craving.

Citation: Neuropsychopharmacology, January 2015, vol./is. 40/2(406-411), 0893-133X;1740-634X (Jan 2015)

Author(s): Janes, Amy C; Park, Min Tae M; Farmer, Stacey; Chakravarty, M. Mallar

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Language: English

Abstract: The striatum has a clear role in addictive disorders and is involved in drug-related craving. Recently, enhanced striatal volume was associated with greater lifetime nicotine exposure, suggesting a bridge between striatal function and structural phenotypes. To assess this link between striatal structure and function, we evaluated the relationship between striatal morphology and this brain region's well-established role in craving. In tobacco smokers, we assessed striatal volume, surface area, and shape using a new segmentation methodology coupled with local shape indices. Striatal morphology was then related with two measures of craving: state-based craving, assessed by the brief questionnaire of smoking urges (QSU), and craving induced by smoking-related images.

self-administration period and after withdrawal from cocaine. In contrast, the sucrose group exhibited an early increase in A:N ratios (acquisition) that returned toward baseline values with continued self-administration (maintenance) and after withdrawal. The sucrose rats also displayed a decrease in NMDA current decay time with continued self-administration (maintenance), which normalized after withdrawal. Cocaine self-administering rats exhibited impairment in NMDA-dependent long-term depression (LTD) that could be rescued by GluN2B-containing NMDA receptor blockade. Sucrose self-administering rats demonstrated no impairment in NMDA-dependent LTD. During the maintenance period of self-administration, in vivo (daily intraperitoneally for 5 days) pharmacologic blockade of GluN2B-containing NMDA receptors did not reduce lever pressing for cocaine. However, in vivo GluN2B blockade did normalize A:N ratios in cocaine self-administering rats, and dissociated the magnitude of ovBNST A:N ratios from drug-seeking behavior after protracted withdrawal. Altogether, our data demonstrate when and how bidirectional plasticity at ovBNST excitatory synapses becomes dysfunctional with cocaine self-administration and that NMDA-mediated potentiation of AMPA receptors in this region may be part of the neural circuits of drug relapse. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cocaine
*N-Methyl-D-Aspartate
*AMPA
*Long-term Depression (Neuronal)
*Synaptic Plasticity
Neural Receptors
Rats

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

66. XRCC5 as a risk gene for alcohol dependence: Evidence from a genome-wide gene-set-based analysis and follow-up studies in Drosophila and humans.

Citation: Neuropsychopharmacology, January 2015, vol./is. 40/2(361-371), 0893-133X;1740-634X (Jan 2015)

Author(s): Juraeva, Dilafruz; Treutlein, Jens; Scholz, Henrike; Frank, Josef; Degenhardt, Franziska; Cichon, Sven; Ridinger, Monika; Mattheisen, Manuel; Witt, Stephanie H; Lang, Maren; Sommer, Wolfgang H; Hoffmann, Per; Herms, Stefan; Wodarz, Norbert; Soyka, Michael; Zill, Peter; Maier, Wolfgang; Junger, Elisabeth; Gaebel, Wolfgang; Dahmen, Norbert; Scherbaum, Norbert; Schmal, Christine; Steffens, Michael; Lucae, Susanne; Ising, Marcus; Smolka, Michael N; Zimmermann, Ulrich S; Muller-Myhsok, Bertram; Nothen, Markus M; Mann, Karl; Kiefer, Falk; Spanagel, Rainer; Brors, Benedikt; Rietschel, Marcella

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Language:

English

Abstract:

Genetic factors have as large role as environmental factors in the etiology of alcohol dependence (AD). Although genome-wide association studies (GWAS) enable systematic searches for loci not hitherto implicated in the etiology of AD, many true findings may be missed owing to correction for multiple testing. The aim of the present study was to circumvent this limitation by searching for biological system-level differences, and then following up these findings in humans and animals. Gene-set-based analysis of GWAS data from 1333 cases and 2168 controls identified 19 significantly associated gene-sets, of which 5 could be replicated in an independent sample. Clustered in these gene-sets were novel and previously identified susceptibility genes. The most frequently present gene, ie in 6 out of 19 gene-sets, was X-ray repair complementing defective repair in Chinese hamster cells 5 (XRCC5). Previous human and animal studies have implicated XRCC5 in alcohol sensitivity. This phenotype is inversely correlated with the development of AD, presumably as more alcohol is required to achieve the desired effects. In the present study, the functional role of XRCC5 in AD was further validated in animals and humans. *Drosophila* mutants with reduced function of Ku80-the homolog of mammalian XRCC5-due to RNAi silencing showed reduced sensitivity to ethanol. In humans with free access to intravenous ethanol self-administration in the laboratory, the maximum achieved blood alcohol concentration was influenced in an allele-dose-dependent manner by genetic variation in XRCC5. In conclusion, our convergent approach identified new candidates and generated independent evidence for the involvement of XRCC5 in alcohol dependence. (PscINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication:

STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Genes](#)
[*Genetics](#)
[*Risk Factors](#)
[*Species Differences](#)
[Drosophila](#)
[Mammals](#)

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

67. Computer-aided diagnosis of alcoholism-related EEG signals.

Citation: Epilepsy & Behavior, December 2014, vol./is. 41/(257-263), 1525-5050 (Dec 2014)

Author(s): Acharya, U. Rajendra; S, Vidya; Bhat, Shreya; Adeli, Hojjat; Adeli, Amir

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Language: English

Abstract: Alcoholism is a severe disorder that affects the functionality of neurons in the central nervous system (CNS) and alters the behavior of the affected person. Electroencephalogram (EEG) signals can be used as a diagnostic tool in the evaluation of subjects with alcoholism. The neurophysiological interpretation of EEG signals in persons with alcoholism (PWA) is based on observation and interpretation of the frequency and power in their EEGs compared to EEG signals from persons without alcoholism. This paper presents a review of the known features of EEGs obtained from PWA and proposes that the impact of alcoholism on the brain can be determined by computer-aided analysis of EEGs through extracting the minute variations in the EEG signals that can differentiate the EEGs of PWA from those of nonaffected persons. The authors advance the idea of automated computer-aided diagnosis (CAD) of alcoholism by employing the EEG signals. This is achieved through judicious combination of signal processing techniques such as wavelet, nonlinear dynamics, and chaos theory and pattern recognition and classification techniques. A CAD system is cost-effective and efficient and can be used as a decision support system by physicians in the diagnosis and treatment of alcoholism especially those who do not specialize in alcoholism or neurophysiology. It can also be of great value to rehabilitation centers to assess PWA over time and to monitor the impact of treatment aimed at minimizing or reversing the effects of the disease on the brain. A CAD system can be used to determine the extent of alcoholism-related changes in EEG signals (low, medium, high) and the effectiveness of therapeutic plans. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Brain](#)
[*Computer Assisted Diagnosis](#)
[*Electroencephalography](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in *Epilepsy and Behavior*

68. Narrative therapy integration within substance abuse groups.

- Citation:** Journal of Creativity in Mental Health, October 2014, vol./is. 9/4(511-522), 1540-1383;1540-1391 (Oct 2014)
- Author(s):** Clark, Ashley A
- Correspondence Address:** Clark, Ashley A.: Walden University, 1300 Sunset Lane, Ste. 3120, Culpeper, VA, US, 22701, ashley.clark@waldenu.edu
- Institution:** Walden University, Culpeper, VA, US
- Language:** English
- Abstract:** Cognitive-behavioral therapy and motivational interviewing have gained increasing importance within the literature body as approaches to utilize when working with the substance abuse population. Despite a strong focus within the research on these approaches, however, substance abuse and substance abuse-related behaviors continue to have a detrimental effect on the community. As research demonstrates the potential efficacy of narrative therapy in various areas, evaluation of its application in substance abuse services is important. Integration of two narrative therapy techniques with potential integration into group therapy is introduced with the rationale, assumptions, and objectives of the approach. In addition, adaptations and limitations are discussed. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Taylor & Francis Group, LLC
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Addiction](#)
[*Drug Abuse](#)
[*Motivational Interviewing](#)
[*Narrative Therapy](#)
[*Storytelling](#)
[Cognitive Behavior Therapy](#)
[Counseling](#)
- Source:** PsycINFO

69. Validity of the Swedish SCID and ADDIS diagnostic interviews for substance use disorders: Sensitivity and specificity compared with a LEAD golden standard.

- Citation:** Nordic Journal of Psychiatry, January 2015, vol./is. 69/1(48-56), 0803-9488;1502-4725 (Jan 2015)
- Author(s):** Gerdner, Arne; Kestenber, Jenny; Edvinsson, Mattias
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- Language:** English
- Abstract:** Objective: The study explores agreement on diagnoses and diagnostic criteria for substance use disorders between two structured assessment interviews, the Structured Clinical Interview for the DSM-IV (SCID) and the Alcohol/Drug Diagnos Instrument (ADDIS). Both interviews are compared with a golden standard (GS), based on a LEAD model (Longitudinal, Expert, All Data). Method: Patients were interviewed concerning substance use problems by trained interviewers using SCID and ADDIS separately and blind to each other's results. SCID and ADDIS interviews were compared with each other, and both were compared with a GS. Results: Satisfactory agreement exists between SCID and ADDIS on criteria as well as final diagnostic suggestions, although ADDIS tended to propose dependence diagnoses somewhat more often than SCID. Agreement between SCID and GS is moderate. Sensitivity of SCID is satisfactory, as is specificity for lifetime diagnoses, while specificity for current diagnoses is perfect. ADDIS demonstrates

substantial to perfect agreement with GS on dependence diagnoses and moderate agreement on abuse diagnoses (both lifetime and current), as well as showing excellent to perfect overall sensitivity and specificity. Both instruments are in almost perfect agreement with the GS on severity ratings. Conclusion: Both ADDIS and SCID can be used to ensure good standards in the diagnostic assessment of substance use disorders (both alcohol and drugs), with and without psychiatric comorbidity. Significant outcomes. Both SCID and ADDIS are in good agreement with the GS based on a LEAD model concerning substance use disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Drug Sensitivity](#)
[*Psychometrics](#)
[*Test Reliability](#)
[*Test Validity](#)
[Diagnostic and Statistical Manual](#)
[Foreign Language Translation](#)
[Mental Disorders](#)
[Psychodiagnostic Interview](#)
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in *Nordic Journal of Psychiatry*

70. Mixed methods study of help seekers and self-changers responding to an online recovery survey.

Citation: Alcohol and Alcoholism, January 2015, vol./is. 50/1(82-88), 0735-0414;1464-3502 (Jan 1, 2015)
Author(s): Witbrodt, Jane; Borkman, Thomasina J; Stunz, Aina; Subbaraman, Meenakshi Sabina
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Language: English
Abstract: Aims: To compare self-changers (natural recovery) with help seekers on demographics, pre-recovery problem severity, and recovery beliefs and behaviors; and to augment these quantitative findings with information extracted from the qualitative stories of a subset of self-changers to explore themes in recovery paths as informed by a nascent natural recovery literature. Methods: Quantitative secondary analyses were conducted with persons who had responded to a US nationwide online survey called 'What Is Recovery' (WIR) and who reported a prior lifetime alcohol problem (n = 5495). Six men and six women (with longer-term recoveries) interviewed later were asked to tell their 'recovery story from the beginning up to now'. These were coded using a narrative approach. Results: Compared with help seekers, self-changers were younger and never married: they did not differ on problem severity, gender, ethnicity or education. Self-changers identified with 'used to have a problem' more than in recovery/recovered, reported fewer years in that status, and reported more current, non-problematic substance use. A new concept of shadow help and shadow obstacles to help-seeking emerged from the qualitative analysis. Though self-changers believed that they had overcome their alcohol problem on their own, change actually occurred within a social context that allowed access to information, normative expectations, relationships, and other opportunities that provided important resources for change. Conclusion: Findings imply that the concept of help-seeking needs to be re-conceptualized to include the informal help we found in this study. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Rehabilitation](#)
[*Alcoholism](#)
[*Help Seeking Behavior](#)
[*Recovery \(Disorders\)](#)
[*Self Help Techniques](#)

Source: PsycINFO

Full Text: Available from *Oxford University Press* in [Alcohol and Alcoholism](#)

71. Increased metabotropic glutamate 2/3 receptor binding in the perigenual anterior cingulate cortex of Cloninger type 2 alcoholics: A whole-hemisphere autoradiography study.

Citation: Alcohol and Alcoholism, January 2015, vol./is. 50/1(62-67), 0735-0414;1464-3502 (Jan 1, 2015)

Author(s): Laukkanen, Virpi; Karkkainen, Olli; Kupila, Jukka; Kautiainen, Hannu; Tiihonen, Jari; Storvik, Markus

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Language: English

Abstract: Aims: Metabotropic glutamate receptors 2 and 3 (mGluR2/3) contribute to control the level of glutamate in the synapse. In rodents, mGluR2/3 agonists attenuate the reinstatement of alcohol-seeking behavior. Linking possible alterations of the mGluR2/3 system to the etiology and type of alcoholism could provide valuable information for the development of novel mGluR2/3 function modulating therapies in addiction treatment. To date, mGluR2/3 binding density has not been studied in human alcoholics. We aimed to investigate the possible differences in mGluR2/3 binding between Cloninger type 1 anxiety-prone and type 2 impulsive alcoholics and controls. Methods: We performed a post-mortem whole-hemisphere autoradiography to study the mGluR2/3 binding density of 9 type 1 alcoholics, 8 type 2 alcoholics and 10 controls. [H]LY341495, a potent group II metabotropic glutamate receptor antagonist, was used as the radio-ligand with L-glutamate as a displacer. Results: [H]LY341495 binding density was statistically significantly increased ($P = 0.046$) in the perigenual anterior cingulate cortex (pACC) of type 2 alcoholics when compared with controls. In other brain areas, no significant difference between the groups was found. Conclusion: This preliminary study suggests that impulsive type 2 alcoholics might have alterations in the mGluR2/3 function in the pACC, a brain area presumed to be involved in the control of drug-seeking behaviors and self-control. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Glutamate Receptors](#)
[*Receptor Binding](#)
[*Cingulate Cortex](#)
[Synapses](#)

Source: PsycINFO
Full Text: Available from *Oxford University Press* in [Alcohol and Alcoholism](#)

72. Lower [H]citalopram binding in brain areas related to social cognition in alcoholics.

Citation: Alcohol and Alcoholism, January 2015, vol./is. 50/1(46-50), 0735-0414;1464-3502 (Jan 1, 2015)

Author(s): Karkkainen, Olli; Laukkanen, Virpi; Haukijarvi, Tuija; Kautiainen, Hannu; Tiihonen, Jari; Storvik, Markus

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Language: English

Abstract: Aims: In the present study, putative alterations in the serotonin transporter density were evaluated in anterior and posterior insula, posterior cingulate cortex, dorsolateral and dorsomedial prefrontal cortex, hippocampus, parahippocampal gyrus and dorsal raphe nucleus in Cloninger type 1 (n = 9) and type 2 (n = 8) alcoholics and non-alcoholic controls (n = 10). Methods: Human whole-hemisphere autoradiography was used to measure [H]citalopram binding to serotonin transporters in eight brain areas in all postmortem brains. Results: Significant differences were observed in the mean [H]citalopram binding between the study groups, with antisocial type 2 alcoholics showing the lowest binding. Differences between the study groups were prominent in the posterior insula and posterior cingulate cortex, where both alcoholic groups had low [H]citalopram binding, and in the parahippocampal gyrus where only antisocial type 2 alcoholics had low [H]citalopram binding when compared with non-alcoholic controls. Conclusion: Although these data are preliminary, and from relatively small diagnostic groups, these results show that alcoholics may have lower serotonergic tone in the brain, thus decreasing social cognition and increasing alcohol-cue reactivity. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Citalopram](#)
[*Serotonin](#)
[*Social Cognition](#)
[Brain](#)
[Risk Factors](#)

Source: PsycINFO
Full Text: Available from *Oxford University Press* in [Alcohol and Alcoholism](#)

73. Relationship between the thyroid axis and alcohol craving.

Citation: Alcohol and Alcoholism, January 2015, vol./is. 50/1(24-29), 0735-0414;1464-3502 (Jan 1, 2015)

Author(s): Aoun, Elie G; Lee, Mary R; Haass-Koffler, Carolina L; Swift, Robert M; Addolorato, Giovanni; Kenna, George A; Leggio, Lorenzo

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- Institution:** Department of Psychiatry and Human Behavior, Brown University Medical School, Providence, RI, US; Section on Clinical Psychoneuroendocrinology and Neuropsychopharmacology, Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD, US; Department of Behavioral and Social Sciences, Brown University, Providence, RI, US; Department of Psychiatry and Human Behavior, Brown University Medical School, Providence, RI, US; Institute of Internal Medicine, Catholic University of Rome, Rome, Italy; Department of Psychiatry and Human Behavior, Brown University Medical School, Providence, RI, US; Section on Clinical Psychoneuroendocrinology and Neuropsychopharmacology, Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD, US
- Language:** English
- Abstract:** Aims: A few studies have suggested a relationship between thyroid hormones and alcohol dependence (AD) such as a blunted increase of thyroid stimulating hormone (TSH) in response to thyrotropin-releasing hormone (TRH), lower levels of circulating free triiodothyronine (fT3) and free thyroxine (fT4) levels and down regulation of the TRH receptors. The current study aimed to explore the relationship between the hormones of the thyroid axis and alcohol-seeking behaviors in a sample of alcohol-dependent patients. Methods: Forty-two treatment-seeking alcohol-dependent individuals enrolled in a 12-week treatment study were considered. The Timeline Follow Back (TLFB) was used to assess the number of drinks consumed during the 12-week period. Blood levels of thyroid hormones (TSH, fT3 and fT4) were measured prior to and at the end of treatment. Questionnaires were administered to evaluate craving for alcohol [Penn Alcohol Craving Scale (PACS) and the Obsessive Compulsive Drinking Scale (OCDS) and its two subscales ODS for obsessions and CDS for compulsions] as well as anxiety [State and Trait Inventory (STAI)], depression [the Zung Self-Rating Depression Scale (Zung)] and aggression [the Aggressive Questionnaire (AQ)]. Results: At baseline, we found significant positive correlations between fT3 and OCDS ($r = 0.358$, $P = 0.029$) and CDS ($r = 0.405$, $P = 0.013$) and negative correlations between TSH levels and STAI ($r = -0.342$, $P = 0.031$), and AQ ($r = -0.35$, $P = 0.027$). At the end of the 12-week study period, abstinent patients had a greater change in TSH than those who relapsed (-0.4 vs. -0.25 , $F(1,24) = 5.4$, $P = 0.029$). Conclusion: If confirmed in larger samples, these findings could suggest that the thyroid axis might represent a biomarker of alcohol craving and drinking. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcohol Rehabilitation](#)
[*Alcoholism](#)
[*Craving](#)
[*Thyroid Hormones](#)
[Health Care Seeking Behavior](#)
[Thyrotropin](#)
- Source:** PsycINFO
- Full Text:** Available from *Oxford University Press* in [Alcohol and Alcoholism](#)

74. Vitamin D, vascular calcification and mortality among alcoholics.

- Citation:** Alcohol and Alcoholism, January 2015, vol./is. 50/1(18-23), 0735-0414;1464-3502 (Jan 1, 2015)
- Author(s):** Quintero-Platt, Geraldine; Gonzalez-Reimers, Emilio; Martin-Gonzalez, M. Candelaria; Jorge-Ripper, Carlos; Hernandez-Luis, Ruben; Abreu-Gonzalez, Pedro; Rodriguez-Gaspar, Melchor; Santolaria-Fernandez, Francisco

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Institution: Servicio de Medicina Interna, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain; Servicio de Medicina Interna, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain; Servicio de Medicina Interna, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain; Servicio de Medicina Interna, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain; Servicio de Medicina Interna, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain; Departamento de Fisiologia, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain; Servicio de Medicina Interna, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain; Servicio de Medicina Interna, Hospital Universitario de Canarias, Universidad de La Laguna, Tenerife, Spain

Language: English

Abstract: Aims: To analyze the relationship between low vitamin D levels and mortality among alcoholics. Methods: One hundred twenty-eight alcoholic patients admitted to our hospital were followed up as outpatients. Nutritional status was evaluated measuring percentages of fat and lean mass in different body compartments. Results: Lower vitamin D levels were observed in patients with worse liver function. Vitamin D was lower in patients with lower total lean mass ($Z = 2.8$, $P = 0.005$), but it was not related to fat mass. There was a significant trend to higher long-term mortality among non-cirrhotics with vitamin D levels below 30 ng/ml, although Cox's regression model revealed that only Child score and age were independently related to mortality. Conclusion: Vitamin D deficiency is common among alcoholic patients and is associated with low lean mass and liver dysfunction. Among non-cirrhotics, serum vitamin D levels below 30 ng/ml are associated with a greater long-term mortality. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Death and Dying](#)
[*Vitamins](#)
[Cirrhosis \(Liver\)](#)
[Patients](#)

Source: PsycINFO

Full Text: Available from *Oxford University Press* in [Alcohol and Alcoholism](#)

75. Alcohol consumption among the over 50s: International comparisons.

Citation: Alcohol and Alcoholism, January 2015, vol./is. 50/1(1-10), 0735-0414;1464-3502 (Jan 1, 2015)

Author(s): Gell, Lucy; Meier, Petra S; Goyder, Elizabeth

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Institution: School of Health and Related Research, University of Sheffield, Sheffield, United Kingdom; School of Health and Related Research, University of Sheffield, Sheffield, United Kingdom; School of Health and Related Research, University of Sheffield, Sheffield, United Kingdom

Language: English

Abstract: Aim: Research exploring alcohol consumption patterns and behaviour change among older adults is relatively scarce, often necessitating reliance on international evidence. To understand the degree to which findings may be generalizable across countries, this review compares recent epidemiological evidence from developed countries on the

prevalence of abstinence and potentially problematic alcohol consumption in older adults. Methods: Medline, EMBASE, Web of Science and PsychInfo were searched for English language publications, identifying 21 peer-reviewed publications and six reports, including data from 17 national surveys and 10 general practice and community samples published since 2000. Results: Of the developed countries for which data are available on adults aged over 50 years, rates of past 12-month abstinence and former drinking are lowest in England and Finland, and highest in Korea and the USA. The prevalence of binge drinking varies widely between studies, whilst rates of alcohol dependence are broadly similar. Conclusions: Older adults in developed countries report different rates of abstinence and alcohol consumption. This places obvious limitations on the extrapolation of results from specific research findings and policy strategies to other countries. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Aging](#)
[*Alcohol Drinking Patterns](#)
[*Alcoholism](#)
[*Behavior Change](#)
[*Developed Countries](#)
[Cross Cultural Differences](#)

Source: PsycINFO

Full Text: Available from *Oxford University Press* in [Alcohol and Alcoholism](#)

76. An outcome study of alcoholic families in Poland Using FACES IV.

Citation: Journal of Family Psychotherapy, October 2014, vol./is. 25/4(348-358), 0897-5353;1540-4080 (Oct 2014)

Author(s): Margasinski, Andrzej

Correspondence Address: Margasinski, Andrzej: Akademia im. Jana Dlugosza w Czestochowie, Wydzial Pedagogiczny, ul. Waszyngtona 4/8, Czestochowa, Poland, 42-200, a.margasinski@gmail.com

Institution: Institute of Pedagogy, Jan Dlugosz University, Czestochowa, Poland

Language: English

Abstract: This study was conducted in Poland with a group of 124 alcoholic families and 150 control families. The main instrument was the Olson Circumplex Model and the Polish translation called FACES IV-SOR. Two assessments were taken, first at the start of the addicted husband's therapy and again after eight to ten weeks at the end of the initial treatment phase. At the pre-test, there were statistically significant differences between the alcoholic and control groups on all scales, with the exception of the Rigidity Scale. At post-test, there were very positive changes in alcoholic families and they became very similar to the healthy control group. The results confirmed the effectiveness of therapy with alcoholics and the impact that it has on the family system. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Family Therapy](#)
[*Psychometrics](#)
[*Treatment Effectiveness Evaluation](#)
[Family Relations](#)

Source: PsycINFO

77. A comparison of impulsivity, depressive symptoms, lifetime stress and sensation seeking in healthy controls versus participants with cocaine or methamphetamine use disorders.

- Citation:** Journal of Psychopharmacology, January 2015, vol./is. 29/1(50-56), 0269-8811;1461-7285 (Jan 2015)
- Author(s):** Mahoney, James J III; Thompson-Lake, Daisy G. Y; Cooper, Kimberly; Verrico, Christopher D; Newton, Thomas F; De La Garza, Richard II
- Correspondence Address:** De La Garza, Richard, II: Baylor College of Medicine, Menninger Department of Psychiatry and Behavioral Sciences, 1977 Butler Blvd., Ste. E4.163, Houston, TX, US, 77030, rg12@bcm.edu
- Institution:** Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US
- Language:** English
- Abstract:** Previous research has focused on developing theories of addiction that may explain behavior in cocaine- and methamphetamine-dependent individuals. The primary goal of this report was to compare and contrast the prevalence of self-reported measures of impulsivity, depression, lifetime stress and sensation-seeking in healthy controls versus individuals with cocaine or methamphetamine use disorders. Twenty-nine individuals with cocaine use disorders and 31 individuals with methamphetamine use disorders were matched with 31 healthy control participants on several demographic variables. All participants were administered behavioral questionnaires including the Barrett Impulsiveness Scale (assessing impulsivity), Beck Depression Inventory II (assessing depression), Life Stressor Checklist-Revised (assessing lifetime stress) and the Impulsive Sensation Seeking Scale (assessing sensation-seeking). When compared to healthy controls, individuals with cocaine and methamphetamine use disorders had significantly higher levels of impulsivity and sensation-seeking. In addition, when compared to healthy controls, individuals with cocaine use disorders had significantly higher Beck Depression Inventory II scores, while individuals with methamphetamine use disorders had significantly higher Life Stressor Checklist-Revised scores. The results revealed that there were significantly higher levels of impulsivity, depression and sensation-seeking in cocaine users and significantly higher impulsivity, lifetime stress and sensation-seeking in methamphetamine users when compared to healthy controls. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: The Author(s); YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Cocaine](#)
[*Depression \(Emotion\)](#)
[*Drug Abuse](#)
[*Methamphetamine](#)
[Impulsiveness](#)
[Major Depression](#)
[Sensation Seeking](#)
[Stress](#)
- Source:** PsycINFO
- Full Text:** Available from *Highwire Press* in *Journal of Psychopharmacology*

78. Considerations on the role of buprenorphine in recovery from heroin addiction from a UK perspective.

Citation: Journal of Psychopharmacology, January 2015, vol./is. 29/1(43-49), 0269-8811;1461-7285 (Jan 2015)

Author(s): Nutt, David J

Correspondence Address: Nutt, David J.: Centre for Neuropsychopharmacology, Division of Brain Sciences, Faculty of Medicine, Imperial College London, London, United Kingdom, W12 0NN, d.nutt@imperial.ac.uk

Institution: Imperial College London, London, United Kingdom

Language: English

Abstract: The United Kingdom Drug Strategy emphasises recovery as a key focus in the treatment of drug dependence. A framework for recovery is defined in the Recovery-Orientated Drug Treatment report, written by an expert working group, and comprises four key phases: engagement and stabilisation, including the establishment of treatment goals; preparation for change, involving engagement in psychosocial and pharmacological interventions; active change, including detoxification and medical withdrawal; and completion, including interventions that strengthen community integration. A body of evidence supports the benefits of buprenorphine, a partial agonist at mu opioid receptors, in supporting individualised recovery based on this framework, specifically in relation to the potential for rapid stabilisation, flexibility to transition to other treatment options or achieve abstinence, effective blocking of on-top use of illicit drugs, the treatment of comorbidities through the minimisation of drug-drug interactions, and a good safety profile. In addition, the newer abuse-deterrent formulation of buprenorphine combined with the opioid antagonist naloxone is likely to strengthen recovery-orientated systems of care due to its potential to reduce misuse and diversion. Progress through the recovery journey and the ability to sustain recovery will depend on individual needs and goals and on the amount of recovery capital that individuals have developed. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Dependency](#)
[*Drug Rehabilitation](#)
[*Drug Therapy](#)
[*Opiates](#)
[*Recovery \(Disorders\)](#)
[Harm Reduction](#)
[Heroin Addiction](#)
[Methadone](#)

Source: PsycINFO

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

79. Pharmacological treatment of attention deficit hyperactivity disorder with co-morbid drug dependence.

Citation: Journal of Psychopharmacology, January 2015, vol./is. 29/1(15-23), 0269-8811;1461-7285 (Jan 2015)

Author(s): Cunill, R; Castells, X; Tobias, A; Capella, D

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Institution: Unitat d'Hospitalització Psiquiàtrica Penitenciària (UHHP), Parc Sanitari Sant Joan de Deu, Barcelona, Spain; Department of Medical Sciences, Universitat de Girona, Girona, Spain; Institute of Environmental Assessment and Water Research (IDAEA), Spanish Council for Scientific Research (CSIC), Barcelona, Spain; Department of Medical Sciences, Universitat de Girona, Girona, Spain

Language: English

Abstract: Background: Drug dependence is frequent in patients with attention deficit hyperactivity disorder (ADHD). Nevertheless, the efficacy and safety of pharmacological treatments in this population are unclear. Methods: A systematic review with meta-analysis was performed. Randomised placebo-controlled clinical trials investigating the efficacy of pharmacological treatment in patients with co-occurring ADHD and substance use disorder (SUD) were included. ADHD symptom severity, drug abstinence and all-cause treatment discontinuation were the primary study endpoints. The effects of patient-, intervention- and study-related covariates over the primary outcomes were investigated by means of meta-regression. Results: Thirteen studies were included, enrolling a total of 1,271 patients. A small to moderate reduction of ADHD symptoms was found. Meta-regression analysis identified the presence of a lead-in period as a covariate associated with reduced efficacy. Conversely, no beneficial effect was observed either on drug abstinence or treatment discontinuation. The efficacy on ADHD symptoms was smaller in studies with a lead-in period. A positive correlation between the efficacy for ADHD and that for SUD was found. Conclusions: The efficacy of pharmacological interventions for co-occurring ADHD and SUD has been little investigated. Mixed results were obtained: while pharmacological interventions improved ADHD symptoms, no beneficial effect on drug abstinence or on treatment discontinuation was noted. The strength of the recommendation of pharmacological treatment for co-occurring ADHD and SUD is therefore modest. The study was registered with the international prospective register of systematic reviews (PROSPERO): CRD 4212003414. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Attention Deficit Disorder with Hyperactivity](#)
[*Comorbidity](#)
[*Drug Abuse](#)
[*Drug Therapy](#)

Source: PsycINFO

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

80. Only connect: The working alliance in computer-based cognitive behavioral therapy.

Citation: Behaviour Research and Therapy, December 2014, vol./is. 63/(139-146), 0005-7967 (Dec 2014)

Author(s): Kiluk, Brian D; Serafini, Kelly; Frankforter, Tami; Nich, Charla; Carroll, Kathleen M

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Language: English

Abstract: The limited role of therapists in some technology-based interventions raises questions as to whether clients may develop a 'working alliance' with the program, and the impact on relationships with a therapist and/or treatment outcomes. In this study, the Working Alliance Inventory (WAI), and an adapted version for technology-based interventions (WAI-Tech), were administered within a subsample (n = 66) of cocaine-dependent individuals participating in a randomized trial evaluating the efficacy of Computer-Based Training for Cognitive Behavioral Therapy (CBT4CBT) as an adjunct to treatment as usual (TAU). Results suggest the WAI-Tech has relatively similar psychometric characteristics as the standard WAI; however the 'bond' subscale scores were lower on the WAI-Tech [$F(1,52) = 5.78, p < .05$]. Scores on the WAI-Tech were not associated with cocaine use outcomes, whereas total scores on the WAI for those assigned to TAU were associated with the percentage of days abstinent from cocaine ($r = .43, p < .05$). There

was little evidence that adding a technology-based intervention adversely affected the working alliance with a therapist in this sample. These preliminary findings suggest some concepts of working alliance may apply to computer-based CBT, yet the function of the alliance may be different in technology-based interventions than in face-to-face psychotherapies. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cognitive Behavior Therapy](#)
[*Drug Abuse](#)
[*Technology](#)
[*Therapeutic Alliance](#)
[*Computer Assisted Therapy](#)
[Cocaine](#)
[Online Therapy](#)
[Therapists](#)
[Treatment Outcomes](#)

Source: PsycINFO

81. Cortico-accumbens circuitry in schizophrenia: Merely a "reward system"?

Citation: Schizophrenia Research, December 2014, vol./is. 160/1-3(233-234), 0920-9964 (Dec 2014)

Author(s): Rolland, Benjamin; Jardri, Renaud

Correspondence Address: Rolland, Benjamin: Service d'Addictologie, Hopital Fontan 2, CHRU de Lille, CS70001, Lille, France, 59037, Cedex, benjamin.rolland@chru-lille.fr

Institution: Department of Addiction Medicine, CHRU Lille, Lille, France; Department of Child and Adolescent Psychiatry, CHRU Lille, Lille, France

Language: English

Abstract: Comments on an article by A. S. Fischer et al. (see record 2014-29746-001). Fischer et al. found that the administration of either oral delta-9-tetrahydrocannabinol (THC) or smoked cannabis to patients with schizophrenia increased the resting-state functional connectivity (rs-fc) between the nucleus accumbens (NAc) and several anterior brain regions, including the ventral anterior cingulate cortex (vACC), orbitofrontal cortex (OFC), anterior prefrontal cortex (aPFC), parahippocampal cortex, and entorhinal cortex and insular cortex. Based on these findings, the authors concluded that both THC and cannabis improved rs-fc in what they called the "reward system". Future reproductions or extensions of the investigation by Fischer et al. regarding the rs-fc of the NAc among patients with both schizophrenia and cannabis use should carefully evaluate the intensity and nature of patients' positive symptoms (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Schizophrenia](#)
[*Cingulate Cortex](#)
[*Functional Magnetic Resonance Imaging](#)
[Cannabis](#)
[Rewards](#)

Source: PsycINFO

Full Text: Available from *Elsevier* in [Schizophrenia Research](#)
Available from *Elsevier* in [Biological Psychiatry](#)

82. Toward a new model of care: Integrating mental health, substance use, and somatic care.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(375-389) (2015)

Author(s): Dom, Geert; Moggi, Franz

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Institution: Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University Hospital (UZA), Antwerp University (UA), Antwerp, Belgium; University Hospital of Psychiatry, University of Bern, Bern, Switzerland

Language: English

Abstract: (from the chapter) Although research and clinical interventions for patients with dual disorders have been described since as early as the 1980s, the day-to-day treatment of these patients remains problematic and challenging in many countries. Throughout this book, many approaches and possible pathways have been outlined. Based upon these experiences, some key points can be extracted in order to guide to future developments. (1) New diagnostic approaches are warranted when dealing with patients who have multiple problems, given the limitations of the current categorical systems. (2) Greater emphasis should be placed on secondary prevention and early intervention for children and adolescents at an increased risk of later-life dual disorders. (3) Mental, addiction, and somatic care systems can be integrated, adopting a patient-focused approach to care delivery. (4) Recovery should be taken into consideration when defining treatment intervention and outcome goals. (5) It is important to reduce societal risk factors, such as poverty and early childhood adversity. (6) More resources are needed to provide adequate mental health care in the various countries. The development of European guidance initiatives would provide benefits in many of these areas, making it possible to ensure a more harmonized standard of care for patients with dual disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[*Dual Diagnosis](#)
[*Health Care Services](#)
[*Mental Disorders](#)
[Risk Factors](#)

Source: PsycINFO

83. Psychiatric comorbidity in heroin maintenance and methadone maintenance treatments.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(363-373) (2015)

Author(s): Uchtenhagen, Ambros A

Correspondence Address: Uchtenhagen, Ambros A.: Swiss Research Institute for Public Health and Addiction, University of Zurich, Zurich, Switzerland, ambros.uchtenhagen@isgf.uzh.ch

Institution: Swiss Research Institute for Public Health and Addiction, University of Zurich, Zurich, Switzerland

Language: English

Abstract: (from the chapter) Psychiatric disorders occur frequently in individuals with opiate dependence in epidemiology and in clinical studies. A relief from emotional distress is considered to contribute to these elevated rates. Such an effect may contribute to the attractiveness of opioid maintenance treatment for dual diagnosis patients. Psychiatric disorders risk to be overlooked in addiction treatment resulting in frequent dropouts. In opioid maintenance treatment, including methadone maintenance, lack of mental health care may lead to continued use of street heroin and other non-prescribed substances. Heroin maintenance was designed and tested in the 1990s as a response to such failures.

In contrast to the traditional practice in the UK of handing out heroin prescriptions to addicts, the new maintenance concept includes a comprehensive assessment and care programme. It is reserved for otherwise treatment-refractory patients. Rates of psychiatric comorbidity are high at entry to heroin maintenance. The potential to provide a safe and efficient answer to such treatment-refractory patients was researched in six countries. The good retention, reductions in illicit drug use and crime, and improvements in somatic and mental health were confirmed repeatedly. New heroin maintenance became part of the routine treatment system in five countries. In three out of six randomised controlled trials, comparing heroin and methadone maintenance, heroin maintenance resulted in a significantly better outcome for comorbid patients. In conclusion, maintenance treatment for opiate addicts must be prepared to take care of dual diagnosis patients; for treatment-refractory patients the new heroin maintenance treatment is a valuable rescue option. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Comorbidity](#)
[*Epidemiology](#)
[*Heroin Addiction](#)
[*Mental Disorders](#)
[*Methadone Maintenance](#)
[Opiates](#)
Source: PsycINFO

84. Somatic problems and dual disorder patients.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(349-361) (2015)

Author(s): De Hert, Marc; Vancampfort, Davy; Detraux, Johan

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Institution: Department of Neurosciences, KU Leuven, Kortenberg, Belgium; University Psychiatric Centre, KU Leuven, Kortenberg, Belgium; University Psychiatric Centre, KU Leuven, Kortenberg, Belgium

Language: English

Abstract: (from the chapter) Individuals with severe mental illness (SMI) are prone to many different physical health problems. While these diseases are, compared with the general population, more prevalent among people with SMI, their impact on individuals with a dual disorder (=the co-occurrence of SMI with substance use disorder, SUD) seems even to be more significant. Although general research is limited, there is sufficient evidence to conclude that dual disorder patients have a significantly greater medical comorbidity than SMI patients without an SUD. This is confirmed by additional research on major medical diseases in these patients. Studies in SMI patients show a strong relationship between SUDs and human immunodeficiency virus and hepatitis C virus infection. Cigarette smoking and drug abuse, which are highly prevalent among SMI people, are implicated in a higher risk for developing respiratory tract diseases, such as chronic pulmonary disease, and cardiovascular diseases. However, although medical health problems are more prevalent in dual disorder patients, a substantial proportion of these patients do not receive any treatment for these somatic problems. Specific patient, provider, and system factors act as barriers to the recognition and the management of physical disease in these highly vulnerable patients. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Drug Abuse](#)
[*Hepatitis](#)
[*HIV](#)
[*Mental Disorders](#)

[*Somatization Disorder](#)
[Comorbidity](#)

Source: PsycINFO

85. Dual disorders in adolescent populations.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(335-347) (2015)

Author(s): van West, Dirk; Vermeiren, Robert

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Institution: University Centre of Child and Adolescent Psychiatry (UKJA), Ziekenhuis Netwerk Antwerpen (ZNA), Antwerp, Belgium; Department of Child and Adolescent Psychiatry, VU University Medical Center, Duivendrecht, Netherlands

Language: English

Abstract: (from the chapter) Psychiatric comorbidity in adolescents who abuse substances is the rule rather than the exception, and common comorbidities include depression, anxiety disorder, bipolar disorder, conduct disorder, and Attention Deficit Hyperactivity Disorder (ADHD). Among adolescents, the presence of both mental health problems and substance use disorders (SUD) (also called "dual disorders") is related to more severe symptomatology, greater treatment challenges, and poorer outcomes. Research showing that mental health problems often precede SUD in adolescents indicates that there is a critical period for the prevention of dual disorders. Early identification and intervention for mental health disorders, coupled with substance abuse prevention, is of great importance in avoiding damage to the developing brain. Treatment requires an integrated, multidisciplinary plan in which the youngster is actively involved. However, treatment of dual disorders in adolescents is still in its infancy and requires much more evidence-based diagnosis and treatment. The stigma associated with mental health problems and SUD prevents youth from seeking treatment. The difficulty is further exacerbated by the existence of two separate service systems, one for mental health services and another for SUD treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Adolescent Psychiatry](#)
[*Attention Deficit Disorder with Hyperactivity](#)
[*Comorbidity](#)
[*Drug Abuse](#)
[*Mental Disorders](#)

Source: PsycINFO

86. Violence and substance abuse in psychotic patients: A forensic psychiatric perspective.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(321-333) (2015)

Author(s): Goethals, Kris R; De Backer, Lieve; van Marle, H. J. C

Correspondence Address: Goethals, Kris R.: Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University Hospital (UZA), Antwerp, Belgium, Kris.Goethals@uza.be

Institution: Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University Hospital (UZA), Antwerp, Belgium; Psychiatric Center Alexian Brothers, Boechout, Belgium; Erasmus Medical Center, Rotterdam, Netherlands

Language: English

Abstract: (from the chapter) In this chapter, a forensic psychiatric perspective on violent behaviour and substance abuse in psychotic patients will be described. First of all, the prevalence of substance abuse in schizophrenia and other psychotic disorders will be discussed. Next, some clinically important issues will be highlighted, such as the relationship between

substance abuse and violence in psychotic disorders, and the impact of the type of substance on violent behaviour. Co-morbidity of substance abuse and a personality disorder in psychotic offenders will be discussed. Psychiatric services tend to separate mental illness and addiction services, despite evidence that more than half of the patients with a psychotic disorder have problems with alcohol and drug use and dependence. That is why substance abusing forensic patients need special attention. This could be achieved by joined-up working together between forensic and addiction services, and by further broadening forensic psychiatry training to include specialism in substance abuse, and vice versa. Finally we will summarize treatment possibilities. In conclusion, substance abuse has an aggravating effect on criminogenic behaviour, depending on the age at first conviction and the diagnosis. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[*Forensic Psychiatry](#)
[*Psychosis](#)
[*Violence](#)

Source: PsycINFO

87. Comorbidity of smoking with psychiatric disorders.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(307-320) (2015)

Author(s): Batra, Anil

Correspondence Address: Batra, Anil: Department of Psychiatry and Psychotherapy, University Hospital of Tuebingen, Tuebingen, Germany, Anil.Batra@med.uni-tuebingen.de

Institution: Department of Psychiatry and Psychotherapy, University Hospital of Tuebingen, Tuebingen, Germany

Language: English

Abstract: (from the chapter) Indications for comorbidity of smoking with psychiatric disorders have been derived from numerous epidemiological studies. This suggests either an involvement of smoking in the development of psychiatric diseases or the importance of smoking as a habit and the neurobiological effects of nicotine in the context of coping strategies for the psychiatric disorders. Neurobiological and genetic research focuses on the cerebral transmitter function including the serotonergic, dopaminergic, and noradrenergic system and cholinergic transmission. Moreover, effects of smoking on medication might motivate medicated psychiatric patients to practice smoking as a form of self-medication. This chapter will also discuss the need for an intense psychotherapy and when necessary pharmacotherapeutic support in smokers with a psychiatric Comorbidity. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Cholinergic Receptors](#)
[*Comorbidity](#)
[*Coping Behavior](#)
[*Drug Abuse](#)
[*Mental Disorders](#)
[Epidemiology](#)

Source: PsycINFO

88. Evidence-supported psychosocial treatment for dual disorder patients.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(261-277) (2015)

Author(s): Moggi, Franz; Ojehagen, Agneta

Correspondence Address: Moggi, Franz: University Hospital of Psychiatry, University of Bern, Bern, Switzerland, moggi@puk.unibe.ch

Institution: University Hospital of Psychiatry, University of Bern, Bern, Switzerland; Department of Clinical Sciences, Lund University, Lund, Sweden

Language: English

Abstract: (from the chapter) Results on the effectiveness of psychosocial treatments for patients with comorbid psychiatric and substance use disorders (dual disorders) will be discussed based on relevant meta-analyses and comprehensive reviews. Findings pertaining to severe (e.g., schizophrenia) and mild to moderate (e.g., anxiety disorders) dual disorders will be presented. The heterogeneity in patient characteristics, treatments, settings, and measured outcomes within the studies hinders the extraction of simple conclusions regarding how to effectively integrate psychiatric and addiction-oriented services into one psychosocial treatment. However, promising treatment strategies and interventions include integrative programs that comprise motivational interviewing; disorder-specific cognitive-behavioral interventions; substance use reduction interventions such as relapse prevention or contingency management; and/or family interventions. Such programs are generally superior to control groups (e.g., waiting list, treatment as usual) and are sometimes superior to other active treatments (e.g., skills training) in outcomes of substance use, psychiatric disorders, and social functioning. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[*Evidence Based Practice](#)
[*Mental Disorders](#)
[*Psychotherapy](#)
[Dual Diagnosis](#)

Source: PsycINFO

89. Non-substance-related disorders: Gambling disorder and Internet addiction.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(221-236) (2015)

Author(s): Rumpf, Hans-Jurgen; Bischof, Anja; Wolfling, Klaus; Lemenager, Tagrid; Thon, Natasha; Moggi, Franz; Dom, Geert; Wurst, Friedrich Martin

Correspondence Address: Rumpf, Hans-Jurgen: Research Group STEP, Department of Psychiatry and Psychotherapy, University of Lubeck, Lubeck, Germany, hans-juergen.rumpf@uk-sh.de

Institution: Research Group STEP, Department of Psychiatry and Psychotherapy, University of Lubeck, Lubeck, Germany; Research Group STEP, Department of Psychiatry and Psychotherapy, University of Lubeck, Lubeck, Germany; Department of Psychosomatic Medicine and Psychotherapy, Outpatient Clinic for Gaming Addictions, University Medical Center Mainz, Mainz, Germany; Department of Addictive Behaviour and Addiction Medicine, Central Institute of Mental Health, Medical Faculty Mannheim, University of Heidelberg, Mannheim, Germany; Department for Psychiatry and Psychotherapy II, Christian-Doppler Hospital, Paracelsus Medical University, Salzburg, Austria; University Hospital of Psychiatry, University of Bern, Bern, Switzerland; Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University Hospital (UZA), Antwerp University (UA), Antwerp, Belgium; Department for Psychiatry and Psychotherapy II, Christian-Doppler Hospital, Paracelsus Medical University, Salzburg, Austria

Language: English

Abstract: (from the chapter) Behavioural addictions are highly prevalent in specific subgroups and have a major individual and societal impact. Moreover, given the availability and increase of potentially addictive activities in our societal development (e.g. internet, gaming, online pornography) an increase in these types of behavioural disorders is very likely.

Gambling Disorders are best studied among the non-chemical addictions. However, effective treatment interventions need to be further developed, in particular for Internet Addiction. Most of the available evidence supports behavioural interventions as first-line treatment. Specifically for Gambling Disorder, pharmacotherapy can be a useful augmentation. Psychiatric comorbidities are frequent in patients with behavioural addictions and negatively affect the course of non-substance-related disorders. Concurrent treatment of these comorbid disorders is advised, although there is a clear need of conducting studies evaluating the effectiveness of integrated treatment approaches. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Comorbidity](#)
[*Gambling](#)
[*Internet Addiction](#)
[*Treatment Effectiveness Evaluation Intervention](#)
Source: PsycINFO

90. Dual disorders: Mild intellectual disability and substance abuse.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(205-220) (2015)
Author(s): Hammink, A. B; VanDerNagel, J; van de Mheen, D
Correspondence Address: Hammink, A. B.: IVO Addiction Research Institute, Rotterdam, Netherlands, hammink@ivo.nl
Institution: IVO Addiction Research Institute, Rotterdam, Netherlands; Tactus Addiction Research Institute, Enschede, Netherlands; IVO Addiction Research Institute, Rotterdam, Netherlands
Language: English
Abstract: (from the chapter) In European countries, there is an increasing awareness that substance abuse also occurs among people with a mild intellectual disability (MID). Individuals with MID often do not fit within the traditional (addiction) treatment systems and subsequently treatment outcomes can be poor. To improve outcome and treatment retention, programmes should be adapted to the specific needs and competences of these patients. This chapter describes substance abuse among people with MID from a European perspective. It aims at providing information and practical tools for both screening and treatment interventions. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Publication Type: Book; Edited Book
Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[*Treatment Outcomes](#)
[*Intellectual Development Disorder](#)
Source: PsycINFO

91. Addiction and autism spectrum disorder.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(193-204) (2015)
Author(s): van Wijngaarden-Cremers, Patricia J. M; van der Gaag, Rutger Jan
Correspondence Address: van Wijngaarden-Cremers, Patricia J. M.: Department of Addiction and Developmental Psychiatry, Dimence GGz Zwolle, Center of Expertise Developmental Disorders, Deventer, Netherlands, p.vanwijngaarden@dimence.nl

Institution: Department of Addiction and Developmental Psychiatry, Dimence GGz Zwolle, Center of Expertise Developmental Disorders, Deventer, Netherlands; UMCN Nijmegen, Nijmegen, Netherlands

Language: English

Abstract: (from the chapter) At first glance, addictive and autism spectrum disorders (ASD) seem absolutely unrelated. However, in clinical practice this does not appear to be true at all. Many individuals with autism, neurobiological characterized by dopaminergic deregulations, are at high risk for developing addictive behaviors. A prime reason might be to alleviate the high levels of stress and anxiety that they experience in an environment with stimulus overload or in engaging in social situations. The use of substances or repetitive behaviors and bizarre habits may develop rapidly into substance use disorders or behavioral addictions. In some cases the diagnosis of ASD will have been made earlier in life, but parents and workers in the field of autism are often unaware of addiction as a comorbid condition to ASD. Conversely addicted individuals may have an autism spectrum condition that is not recognized, because both relatives and workers in the field of addiction and psychiatry are often unfamiliar with signs of ASD and unaware of the potential comorbidity. Thus the identification of both conditions is a core issue in managing comorbid ASD and addiction. Guidelines for ASD provide useful tools for assessment and guidance for treatment. In relapse prevention interventions, identifying those situations that cause stress and elicit addictive craving and behaviours is crucial. Training skills to learn how to cope, in another ways than by using substances, with these situations are essential within the treatment. In addition, rational pharmacotherapy may prove very helpful. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)
[*At Risk Populations](#)
[*Clinical Practice](#)
[*Pervasive Developmental Disorders](#)

Source: PsycINFO

92. ADHD and addiction.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(179-191) (2015)

Author(s): van Emmerik-van Oortmerssen, Katelijne; Konstenius, Maija; Schoevers, Robert A

Correspondence Address: van Emmerik-van Oortmerssen, Katelijne: Center for Mental Health Care, GGZ InGeest, Amsterdam, Netherlands, Katelijne.van.Oortmerssen@arkin.nl

Institution: Center for Mental Health Care, GGZ InGeest, Amsterdam, Netherlands; Department of Clinical Neuroscience, Division of Psychiatry, Karolinska Institutet, Stockholm, Sweden; Department of Psychiatry, University Medical Center Groningen, University of Groningen, Groningen, Netherlands

Language: English

Abstract: (from the chapter) Attention-deficit hyperactivity disorder (ADHD) is characterized by symptoms of inattention and/or hyperactivity and impulsivity. It is frequently present in substance use disorder (SUD) patients; estimates of the prevalence of ADHD vary between 14 % and 23 % in SUD populations. The high comorbidity is partly based on communal underlying neurobiological characteristics such as a shared genetic background of the two disorders. Neuropsychological correlates of both disorders include a dysfunction of the motivational/reward system and impulsivity. In general, patients with this type of comorbidity represent a more severe subgroup of SUD patients with more additional Comorbidity and a more disadvantageous prognosis and higher treatment drop-out than SUD patients without ADHD. It is important to detect and treat ADHD in SUD patients, and substance use disorder treatment centers can play an important role in this by screening for ADHD. Treatment options may include medication, although convincing evidence of effect in SUD populations is yet lacking, and cognitive behavioral therapy. As problems of SUD and ADHD can be intertwined, it is appropriate to start

ADHD Treatment during SUD treatment, ideally after initial stabilization of substance use. As this patient group is characterized by high complexity, further research and development of integrated treatment programs are warranted. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[*Drug Therapy](#)
[*Mental Disorders](#)
[*Posttraumatic Stress Disorder](#)
[Trauma](#)
Source: PsycINFO

93. Posttraumatic stress disorders and addiction.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(161-177) (2015)
Author(s): Schafer, Ingo; Langeland, Willemien
Correspondence Address: Schafer, Ingo: Department of Psychiatry and Psychotherapy, University Medical Center Hamburg-Eppendorf, Hamburg, Germany, i.schaefer@uke.de
Institution: Department of Psychiatry and Psychotherapy, University Medical Center Hamburg-Eppendorf, Hamburg, Germany
Language: English
Abstract: (from the chapter) Disorders related to stress or trauma are common among patients with substance use disorders (SUD). In clinical samples of patients with SUD, the prevalence of lifetime Posttraumatic Stress Disorder (PTSD) ranges from 26 % to 52 %, and from 15 % to 41 % for current PTSD. A substantial number of these patients suffer from the consequences of severe and prolonged interpersonal trauma usually referred to as "Complex PTSD". Another common consequence of repeated interpersonal trauma in childhood are dissociative symptoms that may or may not co-occur with PTSD in SUD patients. While several hypotheses can explain the relationships between SUD and PTSD, the self-medication hypothesis has the strongest empirical support. Patients with both disorders have a more severe clinical profile than SUD patients without PTSD, poorer adherence to treatment, a shorter duration of abstinence, and worse outcomes across a variety of measures. Their clinical needs often make a treatment approach necessary that integrates SUD specific and trauma specific interventions. Several trauma treatments focusing on the present (i.e. providing skills training and psycho-education) and, more recently, also past-focused (i.e. exposure-based) treatments have been evaluated in SUD patients with co-occurring PTSD. Some of them outperformed SUD treatment-as-usual on PTSD and/or substance use outcomes. Findings on the effects of medication in patients with SUD and co-occurring PTSD are scarce and remain inconclusive. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[*Posttraumatic Stress Disorder](#)
[Stress](#)
[Trauma](#)
Source: PsycINFO

94. Comorbidity of anxiety disorders and substance use.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(149-160) (2015)
Author(s): Soyka, Michael

Correspondence Address: Soyka, Michael: Department of Psychiatry, Ludwig Maximilian University Munich, Munich, Germany, Michael.Soyka@privatklinik-meiringen.ch

Institution: Department of Psychiatry, Ludwig Maximilian University Munich, Munich, Germany

Language: English

Abstract: (from the chapter) Generalized anxiety disorder, panic disorder with and without agoraphobia, social phobia, and specific phobias are frequently associated with substance use disorders. Since anxiety symptoms may occur as a consequence of withdrawal from drugs such as alcohol, opioids, or benzodiazepines or as a result of intoxication, the differential diagnosis between substance-induced anxiety disorders and comorbid psychiatric disorders can be difficult. Epidemiologic studies indicate a two to threefold increased risk for alcohol use disorders in patients with anxiety disorders; specifically, the prevalence of alcohol dependence but not abuse is increased. The increased risk for substance use can be explained only in part by self-medication or tension reduction. The best option for the treatment of comorbid patients might be standard treatment for substance use plus cognitive-behavioral therapy. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Cognitive Behavior Therapy](#)
[*Comorbidity](#)
[*Drug Abuse](#)
[*Generalized Anxiety Disorder](#)
[*Panic Disorder](#)

Source: PsycINFO

95. Personality disorder and addiction.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(137-148) (2015)

Author(s): Walter, Marc

Correspondence Address: Walter, Marc: Department of Psychiatry (UPK), University of Basel, Basel, Switzerland, Marc.Walter@upkbs.ch

Institution: Department of Psychiatry (UPK), University of Basel, Basel, Switzerland

Language: English

Abstract: (from the chapter) Personality disorder and substance use disorder very commonly co-occur. Depending on the sample and setting, comorbid substance use disorder can be diagnosed in approximately every second patient suffering from a personality disorder. Comorbid personality disorder seems to be more prevalent in drug use disorder than in alcohol use disorder. The association between substance use disorder and borderline or antisocial personality disorder is particularly frequent. These comorbidities are generally characterised by severe addiction problems and by an unfavourable clinical course. The differential indication for the treatment of patients with personality disorder and comorbid substance use disorder is of particular importance. For most patients with personality disorders, psychotherapy is the treatment of choice. Pharmacotherapy is helpful in an acute crisis and for other comorbid psychiatric disorders such as depression and psychosis. Three different evidence-based psychotherapies have been examined for comorbid patients (dialectical behaviour therapy; dynamic deconstructive psychotherapy; dual-focused schema therapy). There have been no controlled trials of pharmacotherapy for patients with personality disorder and substance use disorder. In conclusion, the principle should generally be applied that the two disorders should be treated together. However, further research is needed to improve the specific treatment options for patients with personality disorder and substance use disorder. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Comorbidity](#)

*Drug Abuse
 *Drug Therapy
 *Personality Disorders

Source: PsycINFO

96. Bipolar affective disorders and alcohol dependence: Comorbidity, consequences, and treatment.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(119-135) (2015)

Author(s): Preuss, Ulrich W; Wong, J. W. M; Farren, Conor K

Correspondence Address: Preuss, Ulrich W.: Department of Psychiatry, Psychotherapy and Psychosomatics, Teaching Hospital, University of Rostock, Prignitz County Hospital, Rostock, Germany, u.preuss@krankenhaus-prignitz.de

Institution: Department of Psychiatry, Psychotherapy and Psychosomatics, Teaching Hospital, University of Rostock, Prignitz County Hospital, Rostock, Germany; Department of Psychiatry, Ludwig-Maximilians-University, Munich, Germany; Department of Psychiatry, St. Patrick's Hospital, Dublin, Ireland

Language: English

Abstract: (from the chapter) Alcohol use disorders such as dependence, abuse, or hazardous use are frequently seen as comorbid conditions in bipolar affective disorders. These comorbid disorders significantly mutually influence each other's severity and prognosis, result in a more severe course of both diseases and lead to more complications such as rapid cycling or mixed episodes prospectively. Individuals with a primary alcohol use disorder onset may have a better prognosis for the affective symptoms but for not drinking and drug use consequences. Treatment options have been extended by a number of studies during the last half decade. In comorbid patients, cognitive behavioral therapy can be employed, when the patient is stabilized affectively using a mood stabilizer such as lithium. A significant reduction of alcohol use was reported from a study adding valproate to lithium, while other studies with antipsychotics or naltrexone and acamprosate did not yield any efficacy on affective symptoms or drinking patterns. In summary, comorbid individuals with bipolar and alcohol and substance use disorders are severely and chronically affected by both diseases. Treatment options are increasing, including psychotherapy and treatment with mood stabilizers. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Alcoholism
 *Bipolar Disorder
 *Comorbidity
 *Drug Therapy
 *Side Effects (Drug)

Source: PsycINFO

97. Mood disorders and addiction.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(103-117) (2015)

Author(s): Torrens, Marta; Rossi, Paola

Correspondence Address: Torrens, Marta: Institute of Neuropsychiatry and Addiction, Hospital del Mar, IMIM-Hospital del Mar Medical Research Institute, Barcelona, Spain, mtorrens@imim.es

Institution: Institute of Neuropsychiatry and Addiction, Hospital del Mar, IMIM-Hospital del Mar Medical Research Institute, Barcelona, Spain; Institute of Neuropsychiatry and Addiction, Hospital del Mar, IMIM-Hospital del Mar Medical Research Institute, Barcelona, Spain

Language: English

Abstract: (from the chapter) Comorbidity of mood and substance use disorders is the most common dual pathologies in the substance abuse field. High prevalence rates and challenging clinical management of patients diagnosed with this dual disorder imply a great burden for health care systems. Major Depression has been studied in comorbidity with the different drugs of abuse (e.g., alcohol, nicotine, cocaine, heroin, cannabis) with consistent findings throughout the world. Various neurobiological mechanisms are believed to play a role in the etiology of this comorbidity, often determining a severe clinical phenotype with poorer prognosis when compared to addiction and mood disorders only. Treatment of the co-occurrence of depression and substance use disorder involves an integrated approach, simultaneously addressing both the psychiatric and the addictive disorder. Current research into pharmacological-in particular antidepressant drugs-and psychosocial treatments has provided controversial results. More data are needed to develop stronger evidence for the treatment of comorbid major depression and substance use disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)
[*Affective Disorders](#)
[*Comorbidity](#)
[*Drug Abuse](#)
[*Dual Diagnosis](#)
[Pathology](#)

Source: PsycINFO

98. Substance-induced psychotic symptoms.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(87-102) (2015)

Author(s): Bramness, Jorgen G; Franck, Johan

Correspondence Address: Bramness, Jorgen G.: Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway, j.g.bramness@medisin.uio.no

Institution: Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway; Department of Clinical Neuroscience, Karolinska Institutet, Stockholm, Sweden

Language: English

Abstract: (from the chapter) Psychosis can be brought on by a number of different substances such as alcohol, cannabis, sedatives, cocaine, stimulants, and hallucinogens. For some substances the psychosis is predominant in the acute phase (cannabis, cocaine, stimulants, and hallucinogens), but for others the withdrawal phase infers the heightened risk (alcohol and sedatives). Some drugs may also increase the risk of longer lasting psychologic disorders (cannabis and central stimulants), but it remains an area of dispute whether these drugs cause the primary psychosis or whether they precipitate psychosis in individuals who are already vulnerable. This chapter reviews the literature on this topic and gives advice on the treatment of acute and prolonged psychologic illness in relationship to drug use, including delirium tremens caused by withdrawal from alcohol or sedatives. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Psychiatric Symptoms](#)
[*Psychosis](#)
[*Risk Factors](#)

Source: PsycINFO

99. Schizophrenia and addiction.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(75-86) (2015)

Author(s): Gouzoulis-Mayfrank, Euphrosyne; Walter, Marc

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Institution: Department of Psychiatry and Psychotherapy II, LVR Clinics Cologne, Cologne, Germany; Department of Psychiatry, University of Basel, Basel, Switzerland

Language: English

Abstract: (from the chapter) Substance use disorders are highly prevalent among people with schizophrenia. Dually diagnosed patients present with unfavorable course and poor long-term outcomes. Integrated, motivation-based treatment for both disorders in the same setting is considered the treatment of choice for this challenging population. Treatment programs include state-of-the-art pharmacotherapy and psychosocial interventions such as motivational interviewing, psychoeducation, and cognitive-behavioral approaches. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Disease Course](#)
[*Drug Abuse](#)
[*Drug Therapy](#)
[*Psychoeducation](#)
[*Schizophrenia](#)
[Motivational Interviewing](#)

Source: PsycINFO

100. Care for patients with addiction and concurrent disorders in Europe, the United States of America, and Canada: Similarities and differences.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(47-59) (2015)

Author(s): Krausz, Michael; Vogel, Marc; Ploesser, Markus

Correspondence Address: Krausz, Michael: University of British Columbia (UBC), Vancouver, BC, Canada, M.krausz@mac.com

Institution: University of British Columbia (UBC), Vancouver, BC, Canada; Division of Substance Use Disorders, Psychiatric Hospital of the University of Basel, Basel, Switzerland; University of British Columbia (UBC), Vancouver, BC, Canada

Language: English

Abstract: (from the chapter) Dual disorders represent a major burden of disease in both North America and Europe. However, there are important differences concerning health systems and their financing as well as vulnerable subpopulations. Due to financial barriers or structural deficits, emergency rooms often provide the only available care for patients in the USA and Canada, while stepped care approaches are more common in Europe. Differing attitudes and policies impact on treatment paradigms, such as harm reduction, abstinence, or opioid maintenance treatment. These differences can be observed not only on a transatlantic but also on an intra-European level. Structural components and clinical pathways lead to dissimilarities in access to care, particularly detoxification, rehabilitation, and community services. The role of primary care as an important treatment interface is much more recognized in Europe. While innovation is on-going and great scientific progress has been made in the treatment of dual disorders in recent years, the implementation of these findings into "real-world practice" has been insufficient so far. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Comorbidity](#)
[*Drug Addiction](#)
[*Harm Reduction](#)
[*Methadone Maintenance](#)

[Dual Diagnosis](#)
[Mental Disorders](#)

Source: PsycINFO

101. Integrated treatment: The model and European experiences.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(27-45) (2015)

Author(s): van Wamel, Anneke; van Rooijen, Sonja; Kroon, Hans

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Institution: Trimbos Institute, Netherlands Institute for Mental Health and Addiction, Utrecht, Netherlands; Trimbos Institute, Netherlands Institute for Mental Health and Addiction, Utrecht, Netherlands; Trimbos Institute, Netherlands Institute for Mental Health and Addiction, Utrecht, Netherlands

Language: English

Abstract: (from the chapter) Integrated treatment of dual disorder patients was introduced in response to the failures of both sequential and parallel treatment approaches. Integrated treatment aims at treating both disorders concurrently, by one provider or a team of providers who are trained and knowledgeable in both fields (psychiatry and addiction). Care is delivered in a consistent manner, using the same philosophy and approach. There are several integrated care models, but the most elaborate one is the model for Integrated Dual Disorder Treatment (IDDT). The IDDT model consists of more than 20 treatment and organisational components, which makes it comprehensive but difficult to implement. Outreach, motivation-based treatment group treatment and specific pharmacological treatment are some of these components. Over the last decades, integrated treatment has, in many European countries, become the preferred treatment model for dual disorder patients and National expertise centres and consortiums have been established to facilitate and help organisations with the implementation of integrated treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Comorbidity](#)
[*Dual Diagnosis](#)
[*Health Care Delivery](#)
[*Integrated Services](#)

Source: PsycINFO

102. Evolution of mental health and addiction care systems in Europe.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(13-26) (2015)

Author(s): van der Stel, Jaap

Correspondence Address: van der Stel, Jaap: High School Leiden, GGZ inGeest, Haarlem, Netherlands, jaapvanderstel@gmail.com

Institution: High School Leiden, GGZ inGeest, Haarlem, Netherlands

Language: English

Abstract: (from the chapter) In all European countries there are institutions for mental health care and addiction treatment. The way in which they have developed, however, is different in each country. In addition, institutions for mental health care and substance abuse treatment have evolved mostly independently of each other. This hinders an integrated treatment for people with both addiction and other mental disorders. This chapter gives an overview of the health-care systems in Europe in this area. Furthermore, a description of the European institutions that develop policies on this subject and monitor the

developments in the various countries will be provided. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Drug Rehabilitation](#)
[*Integrated Services](#)
[*Mental Health Services](#)
[Drug Abuse](#)
Source: PsycINFO

103. Epidemiological perspectives on comorbidity between substance use disorders and other mental disorders.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015(3-12) (2015)
Author(s): Lieb, Roselind
Correspondence Address: Lieb, Roselind: Division of Clinical Psychology and Epidemiology, Department of Psychology, University of Basel, Basel, Switzerland, roselind.lieb@unibas.ch
Institution: Division of Clinical Psychology and Epidemiology, Department of Psychology, University of Basel, Basel, Switzerland
Language: English
Abstract: (from the chapter) Epidemiological studies all over the world could show impressive associations between different groups of substance use disorders and mental disorders, such as affective disorders or anxiety disorders. Most studies investigated cross-sectional associations. The Munich longitudinal population based Early Developmental Stages of Psychopathology (EDSP) Study reported predictive associations between alcohol and cannabis use disorders and nicotine dependence and other mental disorders. This study revealed associations in both directions: from substance use disorders to other mental disorders and vice versa. Explanation of comorbidity should take into account therefore both directions of causality. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Publication Type: Book; Edited Book
Subject Headings: [*Affective Disorders](#)
[*Anxiety Disorders](#)
[*Comorbidity](#)
[*Drug Abuse](#)
[Epidemiology](#)
Source: PsycINFO

104. Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective.

Citation: Co-occurring addictive and psychiatric disorders: A practice-based handbook from a European perspective., 2015 (2015)
Author(s): Dom, Geert [Ed]; Moggi, Franz [Ed]
Correspondence Address: Dom, Geert: Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University Hospital (UZA), Antwerp University (UA), Antwerp, Belgium, geert.dom@uantwerpen.be
Institution: Collaborative Antwerp Psychiatric Research Institute (CAPRI), Antwerp University Hospital (UZA), Antwerp University (UA), Antwerp, Belgium; University Hospital of Psychiatry, University of Bern, Bern, Switzerland
Language: English
Abstract: (from the cover) This book provides a comprehensive, state of the art overview covering both the diagnosis and the treatment of dual disorders - joint psychiatric and substance use disorders - in a way that is highly relevant to clinical work and the organization of care systems. It is designed to meet the real need for a European perspective on dual disorders, taking into account the realities of European treatment organization. All

chapters have been written by European authors on the basis of existing European treatment programs or guidelines and European research. Dual disorders are increasingly encountered by health professionals working in mental health and addiction care, and they represent a formidable challenge for caregivers, care organizations, and society as a whole. During the past decade, various approaches and programs have been designed to challenge the traditional gap between addiction treatment and mental health care. The overwhelming majority of the programs, however, have emanated from the United States. Given the vast differences between the European and U.S. health contexts, it can be questioned whether these American-oriented treatment programs are of value in European countries. Co-occurring Addictive and Psychiatric Disorders-A Practice-Based Handbook from a European Perspective therefore represents a timely and much-needed addition to literature on the subject. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Addiction](#)
[*Dual Diagnosis](#)
[*Mental Disorders](#)
[*Mental Health Services Treatment](#)

Source: PsycINFO

105. Emotion regulation promotes persistence in a residential substance abuse treatment.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(251-256), 1082-6084;1532-2491 (Jan 2015)

Author(s): Hopwood, Christopher J; Schade, Nick; Matusiewicz, Alexis; Daughters, Stacey B; Lejuez, Carl W

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Institution: Michigan State University, East Lansing, MI, US; Michigan State University, East Lansing, MI, US; University of Maryland, College Park, MD, US; University of Maryland, College Park, MD, US; University of Maryland, College Park, MD, US

Language: English

Abstract: Emotion regulation at treatment entry was evaluated among 115 patients in an inner-city substance use residential facility who either persisted (N = 94) or discontinued treatment (N = 21). Emotion regulation capacity including emotional clarity and the ability to engage in goal-directed behavior despite emotional distress, as well as lower scores on a measure of trait-negative emotionality, were associated with treatment persistence, whereas motivational variables were not. Findings indicate the importance of regulating negative emotions for treatment engagement among substance abusers. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Persistence](#)
[*Residential Care Institutions Dropouts](#)
[Emotional Regulation](#)
[Emotionality \(Personality\)](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

106. Functioning of cannabis abuse and dependence criteria across two different countries: The United States and the Netherlands.

- Citation:** Substance Use & Misuse, January 2015, vol./is. 50/2(242-250), 1082-6084;1532-2491 (Jan 2015)
- Author(s):** Delforterie, Monique; Creemers, Hanneke; Agrawal, Arpana; Lynskey, Michael; Jak, Suzanne; van der Ende, Jan; Verhulst, Frank; Huizink, Anja
- Correspondence Address:** Huizink, Anja: Department of Developmental Psychology, VU University Amsterdam, Van Der Boechorststraat 1, Amsterdam, Netherlands, 1081 BT, a.c.huizink@vu.nl
- Institution:** VU University Amsterdam, Amsterdam, Netherlands; Faculty of Social and Behavioural Sciences, VU University Amsterdam, Amsterdam, Netherlands; Department of Psychiatry, Washington University School of Medicine, St. Louis, MO, US; Addictions Department, Institute of Psychiatry, King's College London, London, United Kingdom; Research Institute of Child Development and Education, University of Amsterdam, Amsterdam, Netherlands; Department of Child and Adolescent Psychiatry/Psychology, Erasmus University Medical Center, Sophia Children's Hospital, Rotterdam, Netherlands; Department of Child and Adolescent Psychiatry/Psychology, Erasmus University Medical Center, Sophia Children's Hospital, Rotterdam, Netherlands; VU University Amsterdam, Department of Developmental Psychology, Amsterdam, Netherlands
- Language:** English
- Abstract:** Background: Cross-national differences could affect the likelihood of endorsement of DSM cannabis abuse and dependence criteria. The present study examines whether cannabis abuse and dependence criteria function differently across U.S. and Dutch cannabis users. Method: Data on lifetime endorsement of DSM-IV cannabis abuse/dependence criteria were utilized from U.S. cannabis users who participated in the National Epidemiological Survey on Alcohol and Related Conditions (NESARC) and from Dutch cannabis users who participated in the Zuid-Holland study. In total, 1,568 cannabis users participated in the NESARC sample, and 359 cannabis users participated in the Zuid-Holland sample. The DSM-IV cannabis abuse/dependence criteria as well as cannabis withdrawal were determined using face-to-face computer-assisted personal interviews. Results: Using Restricted Factor Analysis with Latent Moderated Structures, the cannabis abuse/dependence criteria legal problems ($= -0.43$), failed quit attempts ($= -1.09$), use despite problems ($= -0.32$), and withdrawal ($= -0.53$) showed measurement bias, and were more likely to be endorsed by U.S. than by Dutch cannabis users. Also, men were more likely than women to endorse the criteria hazardous use ($= -0.27$), legal problems ($= -0.49$) and tolerance ($= -0.20$). Findings on failed quit attempts and withdrawal were replicated in matched subsamples, while results on legal problems (country and gender) were partly replicated. Conclusions: Several CUD criteria showed measurement bias across two countries and between males and females. Therefore, differences between countries and gender in prevalence rates of CUD should be regarded with caution. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Cannabis](#)
[*Drug Abuse](#)
[*Drug Dependency](#)
[*Factor Analysis](#)
[*Measurement](#)
[Countries](#)
[Diagnostic and Statistical Manual](#)
[Test Bias](#)
- Source:** PsycINFO
- Full Text:** Available from *Informa Healthcare* in [Substance Use and Misuse](#)

107. Do physical abuse, depression, and parental substance use influence patterns of substance use among child welfare involved youth? Substance use misuse.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(226-235), 1082-6084;1532-2491 (Jan 2015)

Author(s): Snyder, Susan M; Smith, Rachel E

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Institution: School of Social Work, University of North Carolina at Chapel Hill, Chapel Hill, NC, US; School of Social Work, University of North Carolina at Chapel Hill, Chapel Hill, NC, US

Language: English

Abstract: To date studies have not explored patterns of substance use exclusively among youth in the child welfare system. Consequently, little is known about polysubstance use among child welfare-involved youth. This study aimed to explore whether physical abuse, parental substance use, depression, and demographic characteristics predict distinct patterns of substance use among child welfare-involved youth using latent class analysis (LCA). The sample included 822 11-17 year olds who participated in the National Survey of Child and Adolescent Well-being (NSCAW II) study between March 2008 and September 2009. We found the following three classes: (1) polysubstance use, (2) alcohol and marijuana use, and (3) low use. Older youth and youth who experienced physical abuse were at greater risk of being in the polysubstance use class, while living with a biological parent reduced the likelihood of polysubstance use class membership. Youth in the alcohol and marijuana use class were more likely to be older and depressed. Results from this study illuminate important targets for interventions. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Child Abuse](#)
[*Childhood Development](#)
[*Drug Abuse](#)
[*Major Depression](#)
[*Physical Abuse](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

108. Pretreatment assessment-related reductions in drinking among women with alcohol use disorders.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(215-225), 1082-6084;1532-2491 (Jan 2015)

Author(s): Worden, Blaise L; Epstein, Elizabeth E; McCrady, Barbara S

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Institution: Institute of Living, Department of Psychiatry, Hartford, CT, US; Clinical Division, Rutgers University, Center of Alcohol Studies, Piscataway, NJ, US; University of New Mexico, Center on Alcoholism, Substance Abuse, and Addictions, Albuquerque, NM, US

Language: English

Abstract: Background: Preliminary studies have suggested that patients entering research trials for alcohol use disorders (AUDs) may show substantial reductions in drinking prior to beginning treatment. Objectives: Determine whether significant pretreatment reductions in drinking are present in a sample of alcohol-dependent women entering a psychotherapy trial for AUDs, and whether such pretreatment drinking reductions predict lower levels of drinking during and posttreatment. Method: The study included 136 women with DSM-IV alcohol dependence who participated in a trial of individual or couples-based cognitive behavioral therapy for AUDs. Repeated-measures ANOVAs were used to examine changes in drinking across the pretreatment assessment period, and hierarchical multiple regression was used to test whether pretreatment reductions in drinking predicted

continued reduced drinking during treatment and follow-up at 12 months posttreatment. Results: Patients had significant reductions in drinking quantity and frequency throughout the pretreatment period, with one-third of the sample becoming abstinent prior to treatment. Controlling for baseline quantity and frequency of drinking, reductions in pretreatment drinking were predictive of reduced frequency of drinking within- and posttreatment, and lower quantity of drinking per drinking occasion in the within-treatment period but not the posttreatment period. Motivational level and treatment arm did not predict the level of change in drinking across the pretreatment period. Conclusions: The overall reductions in drinking are consistent with previous findings suggesting that female participants in AUD treatment trials can show a substantial amount of reduction in drinking during the pretreatment assessment phase, before therapy skills are imparted. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
 *Human Females
 *Measurement
 Treatment
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in *Substance Use and Misuse*

109. Patterns of drug use, risky behavior, and health status among persons who inject drugs living in San Diego, California: A latent class analysis.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(205-214), 1082-6084;1532-2491 (Jan 2015)
Author(s): Roth, Alexis M; Armenta, Richard A; Wagner, Karla D; Roesch, Scott C; Bluthenthal, Ricky N; Cuevas-Mota, Jazmine; Garfein, Richard S
Correspondence Address: Roth, Alexis M.: Drexel University School of Public Health, 3215 Market St., Room 454, Philadelphia, PA, US, 19104, amr395@drexel.edu
Institution: Department of Community Health and Prevention, Drexel University, Philadelphia, PA, US; San Diego State University, San Diego, CA, US; School of Community Health Sciences, University of Nevada, Reno, Reno, NV, US; San Diego State University, San Diego, CA, US; Department of Preventive Medicine, Keck School of Medicine, USC, Los Angeles, CA, US; University of California San Diego, La Jolla, CA, US; University of California San Diego, Division of Global Public Health, School of Medicine, San Diego, CA, US
Language: English
Abstract: Background: Among persons who inject drugs (PWID), polydrug use (the practice of mixing multiple drugs/alcohol sequentially or simultaneously) increases risk for HIV transmission and unintentional overdose deaths. Research has shown local drug markets influence drug use practices. However, little is known about the impact of drug mixing in markets dominated by black tar heroin and methamphetamine, such as the western United States. Methods: Data were collected through an ongoing longitudinal study examining drug use, risk behavior, and health status among PWID. Latent class analysis (LCA) was used to identify patterns of substance use (heroin, methamphetamine, prescription drugs, alcohol, and marijuana) via multiple administration routes (injecting, smoking, and swallowing). Logistic regression was used to identify behaviors and health indicators associated with drug use class. Results: The sample included 511 mostly white (51.5%) males (73.8%), with mean age of 43.5 years. Two distinct classes of drug users predominated: methamphetamine by multiple routes (51%) and heroin by injection (49%). In multivariable logistic regression, class membership was associated with age, race, and housing status. PWID who were HIV-seropositive and reported prior sexually transmitted infections had increased odds of belonging to the methamphetamine class. Those who were HCV positive and reported previous opioid overdose had an increased

odds of being in the primarily heroin injection class (all P-values < .05). Conclusion: Risk behaviors and health outcomes differed between PWID who primarily inject heroin vs. those who use methamphetamine. The findings suggest that in a region where PWID mainly use black tar heroin or methamphetamine, interventions tailored to sub-populations of PWID could improve effectiveness. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Usage](#)
[*Intravenous Drug Usage](#)
[*Polydrug Abuse](#)
[*Risk Assessment](#)
[Intervention](#)
[Methamphetamine](#)
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

110. Interaction of motivation and psychiatric symptoms on substance abuse outcomes in sober living houses.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(195-204), 1082-6084;1532-2491 (Jan 2015)
Author(s): Polcin, Douglas L; Korcha, Rachael A; Bond, Jason C
Correspondence Address: Polcin, Douglas L.: Alcohol Research Group, 6475 Christie Ave, Emeryville, CA, US, 94608, dpolcin@arg.org
Institution: Alcohol Research Group, Emeryville, CA, US; Alcohol Research Group, Emeryville, CA, US; Alcohol Research Group, Emeryville, CA, US
Language: English
Abstract: Background: Studies show residents of sober living recovery houses (SLHs) make improvements in a variety of areas including alcohol and drug use, arrests, and employment. Longitudinal measures of motivation (assessed as costs and benefits of continuing sobriety) have been shown to be associated with alcohol and drug outcomes in SLHs. However, how motivation interacts with other potentially important factors, such as psychiatric severity, is unclear. Objective: The present study aimed to assess how perceived costs and benefits of sobriety among residents of SLHs differed by psychiatric severity. The study also aimed to assess how costs and benefits interacted with psychiatric severity to influence outcome. Methods: Two hundred forty-five residents of SLHs were assessed at baseline and 6, 12, and 18 months. Results: High psychiatric severity was associated with higher severity of alcohol and drug problems and higher perceived costs of sobriety at all data collection time points. Perceived costs and benefits of sobriety were strong predictors of alcohol and drug problems for participants with low psychiatric severity. Perceived costs, but not perceived benefits, predicted outcomes for residents with high psychiatric severity. Conclusions/Importance: High psychiatric severity is a serious impediment for some residents in SLHs. These individuals perceive sobriety as difficult and that perception is associated with worse outcome. Finding ways to decrease perceived costs and challenges to sustained sobriety among these individuals is essential as is collaboration with local mental health services. SLHs should consider whether additional onsite services or modifications of SLH operations might help this population. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Motivation](#)
[*Psychiatric Symptoms](#)
[*Treatment](#)
[Drug Rehabilitation](#)

[Residential Care Institutions](#)
[Sobriety](#)

Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

111. Chronic physical health problems moderate changes in depression and substance use among dual diagnosed individuals during and after treatment.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(174-183), 1082-6084;1532-2491 (Jan 2015)
Author(s): Cui, Ruifeng; Tate, Susan R; Cummins, Kevin; Skidmore, Jessica R; Brown, Sandra A
Correspondence Address: Tate, Susan R.: Veterans Affairs San Diego Healthcare System, 3350 La Jolla Village Drive, San Diego, CA, US, 92161, srtate@ucsd.edu
Institution: Veterans Affairs San Diego Healthcare System, San Diego, CA, US; Veterans Affairs San Diego Healthcare System, San Diego, CA, US; Department of Psychology, University of California, San Diego, La Jolla, CA, US; Veterans Affairs San Diego Healthcare System, San Diego, CA, US; University of California, San Diego, Office of Research Affairs, La Jolla, CA, US
Language: English
Abstract: Background: Physical illnesses frequently co-occur with depression and substance use disorders and may impact their improvement. Physical illness symptoms may overlap with or exacerbate somatic symptoms of depression. Individuals may use substances to cope with symptoms of physical illness. Objectives: We examined whether chronic physical health problems moderated changes in depression and substance use among dual diagnosed individuals during and in the year following treatment. Methods: Participants were recruited from a Veterans Affairs dual diagnosis outpatient program between March 2000 and November 2007 and were randomized to either Integrated Cognitive-Behavioral Therapy or Twelve-Step Facilitation Therapy. A total of 214 veterans with assessment data for the variables of interest were included in analyses. Participants completed quarterly depression, substance use, and health assessments over an 18 month period. We used linear-mixed effects models to analyze patterns of change for depression and substance use. Results: Individuals with severe chronic health problems and higher intake depression showed slower improvements in both nonsomatic and somatic depression symptoms. Individuals with severe chronic health problems and higher midtreatment substance use showed less improvement in substance use. Conclusions: Assessing and addressing physical health issues during depression and substance use disorder treatment may improve outcomes. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Major Depression](#)
[*Military Veterans](#)
[*Physical Health](#)
[*Treatment](#)

Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

112. Tobacco smoking among male and female alcohol treatment-seekers: Clinical complexities, treatment length of stay, and goal achievement.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(166-173), 1082-6084;1532-2491 (Jan 2015)
Author(s): Walitzer, Kimberly S; Dearing, Ronda L; Barrick, Christopher; Shyhalla, Kathleen
Correspondence Address: Walitzer, Kimberly S.: University at Buffalo, Research Institute on Addictions, 1021 Main St., Buffalo, NY, US, 14203, walitzer@ria.buffalo.edu

Institution: Research Institute on Addictions, University at Buffalo, Buffalo, NY, US; Research Institute on Addictions, University at Buffalo, Buffalo, NY, US; Research Institute on Addictions, University at Buffalo, Buffalo, NY, US; Research Institute on Addictions, University at Buffalo, Buffalo, NY, US

Language: English

Abstract: Background: Literature suggests that tobacco smoking among clients in alcohol treatment has important clinical implications, including poorer treatment outcome. Much of this literature, however, has been derived from research-based treatment samples that utilized stringent inclusion and exclusion criteria, limiting generalizability of findings. Objective: In order to further our understanding of the correlates of smoking among clients with alcohol problems, the present research examines tobacco smoking status at admission for 21,128 adult treatment seekers from 253 community outpatient substance abuse clinics across New York State. Methods: This sample includes tobacco smokers at admission (62%) and women (25%). Clinical complexities at admission (unemployment, lack of high school diploma/GED, criminal justice involvement, mental illness, polysubstance abuse) and length of treatment stay and alcohol-related goal achievement at discharge were assessed by clinic staff. Results: Mixed models revealed that tobacco smoking was significantly associated with all five clinical complexities; interactions with gender indicated that this association was stronger for women with regard to criminal justice involvement and polysubstance abuse. Also, these smokers evidenced shorter substance disorder treatment duration and were less likely to achieve alcohol-related treatment goals relative to their nonsmoking counterparts. Conclusions: Admission tobacco smoking status of alcohol treatment seekers is an important client characteristic with regard to clinical presentation and treatment outcome. Our findings underscore the need to further our understanding of the complexities associated with smoking and especially as it pertains to female smokers. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Drug Abuse](#)
[*Tobacco Smoking](#)
[*Treatment Outcomes](#)
[Human Sex Differences](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

113. Competitive sport involvement and substance use among adolescents: A nationwide study.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(156-165), 1082-6084;1532-2491 (Jan 2015)

Author(s): Veliz, Philip Todd; Boyd, Carol J; McCabe, Sean Esteban

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Institution: Institute for Research on Women & Gender, University of Michigan, Ann Arbor, MI, US; Institute for Research on Women & Gender, University of Michigan, Ann Arbor, MI, US; Institute for Research on Women & Gender, University of Michigan, Ann Arbor, MI, US

Language: English

Abstract: Background: The empirical research examining the impact of sports participation on alcohol and other drug use has produced mixed results. Part of this problem may be the result of how different types of sports participation create different experiences that shape certain types of behaviors that either facilitate or deter substance use. Objectives. We examined the association between different types of competitive sports participation and substance use among a nationally representative sample of adolescents. Methods: Two recent cross-sections from the Monitoring the Future were merged to capture a large

subsection of adolescents who participate in either high-contact sports (football, wrestling, hockey, and lacrosse), semicontact sports (baseball, basketball, field hockey, and soccer), and noncontact sports (cross-country, gymnastics, swimming, tennis, track, and volleyball). Results: Multivariate analyses revealed that adolescents who participated in high-contact sports had higher odds of using substances during the past 30 days and initiating substance use at early ages. Further, adolescents who participated in noncontact sports had lower odds to indicate smoking cigarettes and marijuana during the past 30 days. Conclusions: Parents, educators, and policy makers need to consider that some sporting contexts may be a catalyst to engage in risky behaviors like substance use. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Drug Abuse](#)
[*Sports](#)
[Alcoholism](#)
[Athletic Participation](#)
[Involvement](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

114. Prevalence and correlates of anabolic-androgenic steroid use in a nationally representative sample of 17-year-old Norwegian adolescents.

Citation: Substance Use & Misuse, January 2015, vol./is. 50/2(139-147), 1082-6084;1532-2491 (Jan 2015)

Author(s): Sagoe, Dominic; Andreassen, Cecilie Schou; Molde, Helge; Torsheim, Torbjorn; Pallesen, Stale

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Institution: Department of Psychosocial Science, University of Bergen, Bergen, Norway; Department of Psychosocial Science, University of Bergen, Bergen, Norway; Department of Clinical Psychology, University of Bergen, Bergen, Norway; Department of Psychosocial Science, University of Bergen, Bergen, Norway; Department of Psychosocial Science, University of Bergen, Bergen, Norway

Language: English

Abstract: Background: Anabolic-androgenic steroid (AAS) use has been identified as a serious public health problem. Objectives: This study investigates the prevalence and correlates of AAS use among Norwegian adolescents. Methods: In 2012, a nationally representative sample of 2,055 17-year-old adolescents (963 males and 1,088 females) participated in a survey. The response rate was 70.4%. In addition to questions about AAS use, participants completed the Parental Monitoring Scale, the Family Relations/Cohesion Scale, the Alcohol Use Disorders Identification Test C, the Mini-International Personality Item Pool-Five-Factor Model, the Eysenck Narrow Impulsiveness Subscale, the Arnett Inventory of Sensation Seeking, the Short-Form Buss-Perry Aggression Questionnaire, the Hospital Anxiety and Depression Scale, and the UCLA Loneliness Scale. They also answered questions about demography, gambling, smoking, snus, and narcotic use. Descriptive statistics and logistic regression were used to analyze the data. Results: The lifetime prevalence of AAS use was 0.30% (0.52% in males and 0.09% in females), while current prevalence was 0.25%. Moreover, 19.39% of the sample reported having an acquaintance who used or had used AAS. Having an acquaintance who used or had used AAS was significantly related to snus use, depression, aggression, extraversion, and conscientiousness in both univariate and multivariate logistic regression analyses. Conclusions/Importance: Our findings suggest a high prevalence of AAS use among Norwegian adolescents and denote the significance of social, personality, and health

factors in adolescents' exposure to AAS milieu. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Drug Usage](#)
[*Steroids](#)
[Public Health](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Substance Use and Misuse](#)

115. Locus-specific epigenetic remodeling controls addiction- and depression-related behaviors.

Citation: Nature Neuroscience, December 2014, vol./is. 17/12(1720-1727), 1097-6256;1546-1726 (Dec 2014)

Author(s): Heller, Elizabeth A; Cates, Hannah M; Pena, Catherine J; Sun, Haosheng; Shao, Ningyi; Feng, Jian; Golden, Sam A; Herman, James P; Walsh, Jessica J; Mazei-Robison, Michelle; Ferguson, Deveroux; Knight, Scott; Gerber, Mark A; Nievera, Christian; Han, Ming-Hu; Russo, Scott J; Tamminga, Carol S; Neve, Rachael L; Shen, Li; Zhang, H. Steve; Zhang, Feng; Nestler, Eric J

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Language: English

Abstract: Chronic exposure to drugs of abuse or stress regulates transcription factors, chromatin-modifying enzymes and histone posttranslational modifications in discrete brain regions. Given the promiscuity of the enzymes involved, it has not yet been possible to obtain direct causal evidence to implicate the regulation of transcription and consequent behavioral plasticity by chromatin remodeling that occurs at a single gene. We investigated the mechanism linking chromatin dynamics to neurobiological phenomena by applying engineered transcription factors to selectively modify chromatin at a specific mouse gene in vivo. We found that histone methylation or acetylation at the Fosb locus in nucleus accumbens, a brain reward region, was sufficient to control drug- and stress-evoked transcriptional and behavioral responses via interactions with the

endogenous transcriptional machinery. This approach allowed us to relate the epigenetic landscape at a given gene directly to regulation of its expression and to its subsequent effects on reward behavior. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Nature America, Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Enzymes](#)
[*Transcription Factors](#)
[Genes](#)
[Major Depression](#)
[Mice](#)

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Nature Neuroscience*; Note: ; Collection notes: Academic-License

116. Pathological circuit function underlying addiction and anxiety disorders.

Citation: Nature Neuroscience, December 2014, vol./is. 17/12(1635-1643), 1097-6256;1546-1726 (Dec 2014)

Author(s): Luthi, Andreas; Luscher, Christian

Correspondence Address: Luscher, Christian, christian.luscher@unige.ch

Institution: Friedrich Miescher Institute for Biomedical Research, Basel, Switzerland; Department of Basic Neurosciences, Medical Faculty, University of Geneva, Geneva, Switzerland

Language: English

Abstract: Current models of addiction and anxiety stem from the idea that aberrant function and remodeling of neural circuits cause the pathological behaviors. According to this hypothesis, a disease-defining experience (for example, drug reward or stress) would trigger specific forms of synaptic plasticity, which in susceptible subjects would become persistent and lead to the disease. While the notion of synaptic diseases has received much attention, no candidate disorder has been sufficiently investigated to yield new, rational therapies that could be tested in the clinic. Here we review the arguments in favor of abnormal neuronal plasticity underlying addiction and anxiety disorders, with a focus on the functional diversity of neurons that make up the circuits involved. We argue that future research must strive to obtain a comprehensive description of the relevant functional anatomy. This will allow identification of molecular mechanisms that govern the induction and expression of disease-relevant plasticity in identified neurons. To establish causality, one will have to test whether normalization of function can reverse pathological behavior. With these elements in hand, it will be possible to propose blueprints for manipulations to be tested in translational studies. The challenge is daunting, but new techniques, above all optogenetics, may enable decisive advances. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Nature America, Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Anxiety Disorders](#)
[*Biological Neural Networks](#)
[*Long-term Potentiation](#)
[*Synaptic Plasticity](#)
[Synaptic Vesicle](#)

Source: PsycINFO

Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Nature Neuroscience*; Note: ; Collection notes: Academic-License

117. Examination of illicit drug use frequency using multiple drug assessment methods in mothers referred to treatment by child protective services.

Citation: Journal of Family Violence, November 2014, vol./is. 29/8(911-919), 0885-7482;1573-2851 (Nov 2014)

Author(s): Donohue, Brad; Holland, Jason M; Lopez, Karen; Urgelles, Jessica; Allen, Daniel N

Correspondence Address: Allen, Daniel N.: Department of Psychology, University of Nevada Las Vegas, 4505 Maryland Parkway, Las Vegas, NV, US, 89154-5030, Daniel.allen@unlv.edu

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Department of Psychology, University of Nevada Las Vegas, Las Vegas, NV, US

Language: English

Abstract: It has long been established that illicit drug use contributes to child maltreatment. However, investigators have yet to comprehensively examine illicit drug use in mothers referred to treatment by Child Protective Services (CPS). In this study, 77 mothers who were referred to treatment by CPS for co-existing drug abuse and child neglect were administered the Timeline Follow-Back measure to assess their substance use frequency during the four months preceding treatment. Reports of the mothers' substance use were obtained for the same time period from the mothers' significant others and CPS caseworkers, and mothers were administered urinalysis testing. The purpose of this study was to examine the concordance of these multiple reports, and identify unique predictors of different drug use reporting patterns. The practice of using urinalysis results as a prompt during the mothers' Timeline Follow-Back administration may have contributed to greater frequency of drug use reporting in mothers. Mothers reported progressively more drug use for more distant time periods, as compared with caseworkers. Findings also suggested mothers' reports of drug use were influenced by CPS investigatory case status (i.e., open or closed), ethnicity, and defensive responding. Implications of these findings for clinical practice and future research are discussed. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media New York; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Child Welfare](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Mothers](#)
[*Protective Services](#)
[Child Abuse](#)
[Child Neglect](#)
[Self Report](#)

Source: PsycINFO

118. Sex and love addicts, who sexually offend: Two cases of online use of child pornography (child sexual abuse images).

Citation: Sexual Addiction & Compulsivity, October 2014, vol./is. 21/4(322-341), 1072-0162;1532-5318 (Oct 2014)

Author(s): Griffin-Shelley, Eric

Correspondence Address: Griffin-Shelley, Eric, 4079 Oak Lane, Lafayette Hill, PA, US, 19444, Eric@drgriffin-shelley.com

Institution: Private Practice, Lafayette Hill, PA, US

Language: English

Abstract: Sex and love addicts, who use online pornography, have presented special difficulties for clinicians, legal professionals, and the community with regard to child pornography. A key issue is the risk of online child pornography users being or becoming hands-on child sex offenders. Online sex offenders are generally a little known population with research just beginning to describe this group (Prentky, Burgess, Dowdell, & Federoff, 2010). Case studies of two clients, who self-identified as sex and love addicts and who were arrested for the use of child pornography, suggest the presence of traumatic reenactment of childhood abuse and neglect. These issues are an important dynamic in their sexual acting out as well as a necessary aspect of their therapeutic work to achieve sexual sobriety and recovery. Sexual sobriety and recovery can provide added confidence that such offenders will not re-offend, especially with hands-on crimes. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Child Abuse](#)
[*Pornography](#)
[*Sexual Abuse](#)
[Sex Offenses](#)

Source: PsycINFO

119. Empirical evidence and theoretical considerations on factors contributing to cybersex addiction from a cognitive-behavioral view.

Citation: Sexual Addiction & Compulsivity, October 2014, vol./is. 21/4(305-321), 1072-0162;1532-5318 (Oct 2014)

Author(s): Laier, Christian; Brand, Matthias

Correspondence Address: Brand, Matthias: Department of General Psychology, Cognition, University of Duisburg-Essen, Forsthausweg 2, Duisburg, Germany, 47057, matthias.brand@uni-due.de

Institution: University of Duisburg-Essen, Duisburg, Germany; University of Duisburg-Essen, Duisburg, Germany

Language: English

Abstract: The nature of a phenomenon often called cybersex addiction (CA) and its mechanisms of development are discussed. Previous work suggests that some individuals might be vulnerable to CA, while positive reinforcement and cue-reactivity are considered to be core mechanisms of CA development. In this study, 155 heterosexual males rated 100 pornographic pictures and indicated their increase of sexual arousal. Moreover, tendencies towards CA, sensitivity to sexual excitation, and dysfunctional use of sex in general were assessed. In a latent structural equation model, dysfunctional use of sex mediated the relationship of sexual excitability with CA. The results of the study show that there are factors of vulnerability to CA and provide evidence for the role of sexual gratification and dysfunctional coping in the development of CA. According to the results and theoretical considerations, we present a cognitive-behavioral model of CA addressing factors of vulnerability, the role of cognitions, and the role of positive and negative reinforcement. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Pornography](#)
[*Sexual Arousal](#)
[*Structural Equation Modeling](#)

Source: PsycINFO

120. Neurobehavioral consequences of chronic intrauterine opioid exposure in infants and preschool children: A systematic review and meta-analysis.

- Citation:** BMC Psychiatry, April 2014, vol./is. 14/, 1471-244X (Apr 8, 2014)
- Author(s):** Baldacchino, Alex; Arbuckle, Kathleen; Petrie, Dennis J; McCowan, Colin
- Correspondence Address:** Baldacchino, Alex: Centre for Health Policy, Melbourne School of Population and Global Health, University of Melbourne, Victoria, Australia, a.baldacchino@dundee.ac.uk
- Institution:** Centre for Health Policy, Melbourne School of Population and Global Health, University of Melbourne, Victoria, Australia; Robertson Centre for Biostatistics, Institute of Health and Wellbeing, College of Medical, Veterinary and Life Sciences, University of Glasgow, Glasgow, United Kingdom; Centre for Health Policy, Melbourne School of Population and Global Health, University of Melbourne, Victoria, Australia; Robertson Centre for Biostatistics, Institute of Health and Wellbeing, College of Medical, Veterinary and Life Sciences, University of Glasgow, Glasgow, United Kingdom
- Language:** English
- Abstract:** Background: It is assumed within the accumulated literature that children born of pregnant opioid dependent mothers have impaired neurobehavioral function as a consequence of chronic intrauterine opioid use. Methods: Quantitative and systematic review of the literature on the consequences of chronic maternal opioid use during pregnancy on neurobehavioral function of children was conducted using the Meta-analysis of Observational Studies in Epidemiology (MOOSE) and the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guidelines. We searched Cinahl, EMBASE, PsycINFO and MEDLINE between the periods of January 1995 to January 2012. Results: There were only 5 studies out of the 200 identified that quantitatively reported on neurobehavioral function of children after maternal opioid use during pregnancy. All 5 were case control studies with the number of exposed subjects within the studies ranging from 33-143 and 45-85 for the controls. This meta-analysis showed no significant impairments, at a non-conservative significance level of $p < 0.05$, for cognitive, psychomotor or observed behavioural outcomes for chronic intra-uterine exposed infants and pre-school children compared to non-exposed infants and children. However, all domains suggested a trend to poor outcomes in infants/children of opioid using mothers. The magnitude of all possible effects was small according to Cohen's benchmark criteria. Conclusions: Chronic intra-uterine opioid exposed infants and pre-school children experienced no significant impairment in neurobehavioral outcomes when compared to non-exposed peers, although in all domains there was a trend to poorer outcomes. The findings of this review are limited by the small number of studies analysed, the heterogenous populations and small numbers within the individual studies. Longitudinal studies are needed to determine if any neuropsychological impairments appear after the age of 5 years and to help investigate further the role of environmental risk factors on the effect of 'core' phenotypes. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly credited. The Creative Commons Public Domain Dedication waiver (<http://creativecommons.org/publicdomain/zero/1.0/>) applies to the data made available in this article, unless otherwise stated.; HOLDER: Baldacchino et al.; licensee BioMed Central Ltd.; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Abuse](#)
[*Early Childhood Development](#)
[*Infant Development](#)
[*Opiates](#)
[*Prenatal Exposure](#)
[Mothers](#)
[Neuropsychology](#)

Pregnancy
Risk Factors

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in *BMC Psychiatry*
Available from *BioMedCentral* in *BMC Psychiatry*
Available from *Springer NHS Pilot 2014 (NESLi2)* in *BMC Psychiatry*; 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 *ProQuest* in *BMC Psychiatry*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

121. Perceived need for substance use treatment among young women from disadvantaged communities in Cape Town, South Africa.

Citation: BMC Psychiatry, April 2014, vol./is. 14/, 1471-244X (Apr 4, 2014)

Author(s): Myers, Bronwyn; Kline, Tracy L; Doherty, Irene A; Carney, Tara; Wechsberg, Wendee M

Correspondence Address: Myers, Bronwyn: Alcohol and Drug Abuse Research Unit, South African Medical Research Council, Cape Town, South Africa, bmyers@mrc.ac.za

Institution: Alcohol and Drug Abuse Research Unit, South African Medical Research Council, Cape Town, South Africa; RTI International, Raleigh, NC, US; RTI International, Raleigh, NC, US; Alcohol and Drug Abuse Research Unit, South African Medical Research Council, Cape Town, South Africa; RTI International, Raleigh, NC, US

Language: English

Abstract: Background: Initiation of treatment for substance use disorders is low among young women from disadvantaged communities in Cape Town, South Africa. Yet little is known about the factors that influence perceived need for treatment (a determinant of treatment entry) within this population. Methods: Baseline data on 720 young, drug-using women, collected as part of a randomized field experiment were analyzed to identify predisposing, enabling and health need factors associated with perceived need for treatment. Results: Overall, 46.0% of our sample perceived a need for treatment. Of these participants, 92.4% wanted treatment for their substance use problems but only 50.1% knew where to access services. In multivariable logistic regression analyses, we found significant main effects for ethnicity (AOR = 1.54, 95% CI = 1.05-1.65), income (AOR = 0.96, 95% CI = 0.93-0.99), anxiety (AOR = 1.22, 95% CI = 1.05-1.45), and not having family members with drug problems (AOR = 1.45, 95% CI = 1.05-2.04) on perceived need for treatment. When the sample was stratified by methamphetamine use, income (AOR = 0.87, 95% CI = 0.79-0.96), awareness of treatment services (AOR = 1.84, 95% CI = 1.03-3.27), anxiety (AOR = 1.41, 95% CI = 1.06-1.87) and physical health status (AOR = 6.29, 95% CI = 1.56-25.64) were significantly associated with perceived need for treatment among those who were methamphetamine-negative. No variables were significantly associated with perceived need for treatment among participants who were methamphetamine-positive. Conclusions: A sizeable proportion of young women who could benefit from substance use treatment do not believe they need treatment, highlighting the need for interventions that enhance perceived need for treatment in this population. Findings also show that interventions that link women who perceive a need for treatment to service providers are needed. Such interventions should address barriers that limit young women's use of services for substance use disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly credited. The Creative Commons Public Domain Dedication waiver (<http://creativecommons.org/publicdomain/zero/1.0/>) applies to the data made available in this article, unless otherwise stated.; HOLDER: Myers et al.; licensee BioMed Central Ltd.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Disadvantaged](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Female Attitudes](#)
[*Health Service Needs](#)
[Intervention](#)
[Mental Disorders](#)

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in [BMC Psychiatry](#)
Available from *BioMedCentral* in [BMC Psychiatry](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [BMC Psychiatry](#); 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 *ProQuest* in [BMC Psychiatry](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

122. Emergence and handling of gender. From substance to object.

Original Title: Emergence et maniement du genre dans la clinique, de la substance a l'objet.

Citation: Cliniques mediterraneennes: Psychanalyse et Psychopathologie Freudiennes, 2014, vol./is. 90/(139-151), 0762-7491 (2014)

Author(s): Bourseul, Vincent

Correspondence Address: Bourseul, Vincent: ATER, CRPMS, UFR d'Etudes Psychanalytiques, Universite Paris Diderot-Paris 7, 6 passage Sainte-Avoie, Paris, France, F-75003, vincent.bourseul@gmail.com

Institution: ATER, CRPMS, UFR d'Etudes Psychanalytiques, Universite Paris Diderot-Paris 7, Paris, France

Language: French

Abstract: What do we make of gender in the clinical practice? How does it emerge and which manipulation, which practice we can have it ? From clinical elements, this article aims at describing the uses of gender by the subjects, and to light the offer that they establish for the analyst, if he well wants to consider them as therapeutic runways. From the substance to the object, gender questions our approach of the addiction, the incorporation, the construction of the body, on the occasion of a deep psychic reorganization. Opens then dimensions and registers, imaginary and symbolic, where the analyst can welcome psychic constructions working in the arrangement of the sexuation of the subject, gender the vector. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Tous droits reserves pour tous pays.; HOLDER: ERES

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Clinical Practice](#)
[*Gender Identity](#)
[*Human Sex Differences](#)
[*Therapeutic Processes](#)

Source: PsycINFO

123. Peripheral neuropathy due to vitamin deficiency, toxins, and medications.

Citation: CONTINUUM: Lifelong Learning in Neurology, October 2014, vol./is. 20/5(1293-1306), 1080-2371;1538-6899 (Oct 2014)

Author(s): Staff, Nathan P; Windebank, Anthony J

Correspondence Address: Staff, Nathan P.: Department of Neurology, Mayo Clinic, 200 First St SW, Rochester, MN, US, 55905, staff.nathan@mayo.edu

Institution: Mayo Clinic, Rochester, MN, US; Department of Neuroscience Research, Mayo Clinic, Rochester, MN, US

Language: English

Abstract: Purpose of Review: Peripheral neuropathies secondary to vitamin deficiencies, medications, or toxins are frequently considered but can be difficult to definitively diagnose. Accurate diagnosis is important since these conditions are often treatable and preventable. This article reviews the key features of different types of neuropathies caused by these etiologies and provides a comprehensive list of specific agents that must be kept in mind. Recent Findings: While most agents that cause peripheral neuropathy have been known for years, newly developed medications that cause peripheral neuropathy are discussed. Summary: Peripheral nerves are susceptible to damage by a wide array of toxins, medications, and vitamin deficiencies. It is important to consider these etiologies when approaching patients with a variety of neuropathic presentations; additionally, etiologic clues may be provided by other systemic symptoms. While length-dependent sensorimotor axonal peripheral neuropathy is the most common presentation, several examples present in a subacute severe fashion, mimicking Guillain-Barre syndrome. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Academy of Neurology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Toxins](#)
[*Vitamins](#)
[*Guillain-Barre Syndrome](#)

Source: PsycINFO

124. The historical origins of priming as the preparation of behavioral responses: Unconscious carryover and contextual influences of real-world importance.

Citation: Understanding priming effects in social psychology., 2014(218-233) (2014)

Author(s): Bargh, John A

Correspondence Address: Bargh, John A.: Department of Psychology, Yale University, 2 Hillhouse Ave., New Haven, CT, US, 06520, john.bargh@yale.edu

Institution: Yale University, New Haven, CT, US

Language: English

Abstract: (from the chapter) Contrary to the recent assertions of skeptics of behavioral priming effects, the concept of priming was not introduced by the Meyer and Schvaneveldt (M-S, 1971) study of brief semantic spreading activation effects (perceptual- interpretation priming); it was originally introduced by Karl Lashley (1951) as a mechanism to increase the probability of a behavioral response (behavioral priming). The priming of the response was Lashley's solution to the problem of smooth behavioral response sequencing. Moreover, the initial priming demonstrations in experimental psychology, which predated M-S by many years, were of carryover effects from one experimental task to another-the same priming paradigm commonly employed in social psychology since the pioneering study of Higgins, Rholes, and Jones (1977). These priming effects were thus of considerably longer duration than the fleeting spreading activation effects obtained by M-S in the lexical decision task. Priming and accessibility effects of which the individual is unaware are commonplace in tasks involving higher mental processes, across diverse areas of psychological research, and often take the original form of carryover effects of task or emotional state to an unrelated subsequent context. In addition, behavioral priming is a natural and ecological phenomenon, as imitation and mimicry effects of perceiving another's behavior on one's own behavioral tendencies are clear manifestations of behavioral priming effects in the real world. These and other natural priming effects have now been demonstrated to have practical and applied importance in everyday life, such as in therapeutic interventions for addictions, increasing

production in the workplace, and providing useful and effective "nudges" to a happier and healthier life. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Behavioral Contrast](#)
[*Decision Making](#)
[*Priming](#)
[*Semantics](#)
[Unconscious \(Personality Factor\)](#)
Source: PsycINFO

125. Neuropsychiatric symptoms as the presenting feature of acquired hepatocerebral degeneration.

Citation: Australian and New Zealand Journal of Psychiatry, October 2014, vol./is. 48/10(959-960), 0004-8674;1440-1614 (Oct 2014)
Author(s): Gleason, Andrew; Hayhow, Brad; Walterfang, Mark; Evans, Andrew; Mocellin, Ramon; Gates, Peter; Velakoulis, Dennis
Correspondence Address: Gleason, Andrew: Royal Melbourne Hospital, Level 2, John Cade Building, Melbourne, VIC, Australia, 3050, andrew.gleason@mh.org.au
Institution: Neuropsychiatry Unit, Royal Melbourne Hospital, Parkville, VIC, Australia; Melbourne Neuropsychiatry Centre, University of Melbourne, Parkville, VIC, Australia; Melbourne Neuropsychiatry Centre, University of Melbourne, Parkville, VIC, Australia; Department of Neurology, Royal Melbourne Hospital, Parkville, VIC, Australia; Melbourne Neuropsychiatry Centre, University of Melbourne, Parkville, VIC, Australia; Department of Neuroscience, Barwon Health, Geelong, VIC, Australia; Melbourne Neuropsychiatry Centre, University of Melbourne, Parkville, VIC, Australia
Language: English
Abstract: Presents a Case report of a 63-year-old man with a recent diagnosis of alcoholic cirrhosis presented to hospital with symptoms of acute paranoia, grandiosity and aggression. He had no past psychiatric history and his family reported complete abstinence of alcohol in the preceding 2 months. On examination his sensorium was clear and there were no physical stigmata of hepatic dysfunction. Liver ultrasound was consistent with cirrhosis but showed no evidence of portal hypertension. MRI brain showed bilateral T1 hyperintensities in the caudate, putamen and globus pallidus. T2 signal in the same region was normal. Acquired Hepatocerebral Degeneration (AHD) is a sub-acute variant of hepatic encephalopathy. It is not associated with delirium and can affect patients without overt clinical or biochemical evidence of hepatic failure. The clinical and radiological features of AHD are associated with elevated manganese levels in the serum, CSF and globus pallidus on autopsy. AHD is therefore an important differential diagnosis when seeking reversible causes of cognitive impairment in patients with alcoholic liver disease. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Country of Publication: HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Alcoholism](#)
[*Grandiosity](#)
[*Liver Disorders](#)
[*Temporal Lobe](#)
[Diagnosis](#)
[Symptoms](#)
Source: PsycINFO
Full Text: Available from *Highwire Press* in [Australian and New Zealand Journal of Psychiatry](#)

126. Concurrent treatment of PTSD and substance use disorders using prolonged exposure (COPE): Therapist guide.

Citation: Concurrent treatment of PTSD and substance use disorders using prolonged exposure (COPE): Therapist guide., 2015 (2015)

Author(s): Back, Sudie E; Foa, Edna B; Killeen, Therese K; Mills, Katherine L; Teesson, Maree; Dansky Cotton, Bonnie; Carroll, Kathleen M; Brady, Kathleen T

Institution: Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; University of Pennsylvania, Philadelphia, PA, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; Microsoft Corporation, US; Yale University School of Medicine, New Haven, CT, US; Medical University of South Carolina, Charleston, SC, US

Language: English

Abstract: (create) This therapist guide and the companion workbook for patients address the treatment of posttraumatic stress disorder (PTSD) and a co-occurring substance use disorder (SUD) using cognitive-behavioral therapy. The program, COPE, represents an integration of two evidence-based treatments: Prolonged Exposure (PE) therapy for PTSD and Relapse Prevention for SUD. COPE was developed by the authors in response to the increased recognition that individuals with PTSD and an SUD have unique needs and tend to have poorer outcomes in standard treatment. Historically, the standard of care has been to treat the SUD first and then treat the PTSD; but with COPE, patients can experience substantial reductions in both PTSD and substance use severity at the same time. Comprised of 12 individual, 60-90 minute therapy sessions, the program includes several components: education about the relationship between PTSD and substance use disorders; education about common reactions to trauma; cognitive-behavioral techniques to help patients manage cravings and high-risk thoughts about using alcohol or drugs; coping skills to help prevent relapse to substances; breathing retraining relaxation exercise; in vivo (real life) exposures; and imaginal exposures. COPE is designed to treat patients by reducing the severity of all four clusters of PTSD symptoms and reducing the severity of alcohol and drug use, thus minimizing the negative impact that PTSD and SUD have on the lives of individuals who suffer from both. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Authored Book

Subject Headings: [*Cognitive Behavior Therapy](#)
[*Drug Abuse](#)
[*Interdisciplinary Treatment Approach](#)
[*Mental Health Program Evaluation](#)
[*Posttraumatic Stress Disorder](#)
[Clinical Practice](#)
[Exposure Therapy](#)
[Therapists](#)

Source: PsycINFO

127. Pain management and opioid risk mitigation in the military.

Citation: Military Medicine, May 2014, vol./is. 179/5(553-558), 0026-4075 (May 2014)

Author(s): Potter, Jennifer Sharpe; Bebart, Vikhyat S; Marino, Elise N; Ramos, Rosemarie G; Turner, Barbara J

Correspondence Address: Potter, Jennifer Sharpe: University of Texas Health Science Center at San Antonio, 7703 Floyd Curl Drive, San Antonio, TX, US, 78229

Institution: University of Texas Health Science Center at San Antonio, San Antonio, TX, US; Department of Emergency Medicine, San Antonio Military Medical Center, Fort Sam Houston, TX, US; University of Texas Health Science Center at San Antonio, San Antonio, TX, US; Wilford Hall Ambulatory Surgical Center, San Antonio, TX, US; University of Texas Health Science Center at San Antonio, San Antonio, TX, US

Language: English

Abstract: Opioid analgesics misuse is a significant military health concern recognized as a priority issue by military leadership. Opioids are among those most commonly prescribed medications in the military for pain management. The military has implemented opioid risk mitigation strategies, including the Sole Provider Program and the Controlled Drug Management Analysis and Reporting Tool, which are used to identify and monitor for risk and misuse. However, there are substantial opportunities to build on these existing systems to better ensure safer opioid prescribing and monitor for misuse. Opioid risk mitigation strategies implemented by the civilian sector include establishing clinical guidelines for opioid prescribing and prescription monitoring programs. These strategies may help to inform opioid risk mitigation in the military health system. Reducing the risk of opioid misuse and improving quality of care for our Warfighters is necessary. This must be done through evidence-based approaches with an investment in research to improve patient care and prevent opioid misuse as well as its sequelae. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Military Personnel](#)
[*Opiates](#)
[*Pain Management](#)
[Pain](#)

Source: PsycINFO

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

128. Persistent pain facilitates response to morphine reward by downregulation of central amygdala GABAergic function.

Citation: Neuropsychopharmacology, August 2014, vol./is. 39/9(2263-2271), 0893-133X;1740-634X (Aug 2014)

Author(s): Zhang, Zhi; Tao, Wenjuan; Hou, Yuan-Yuan; Wang, Wei; Lu, Yun-Gang; Pan, Zhizhong Z

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Institution: Department of Anesthesiology and Pain Medicine, University of Texas MD Anderson Cancer Center, Houston, TX, US; Department of Neurobiology and Biophysics, Key Laboratory of Brain Functions and Diseases, School of Life Science, University of Science and Technology of China, Hefei, China; Department of Anesthesiology and Pain Medicine, University of Texas MD Anderson Cancer Center, Houston, TX, US; Department of Anesthesiology and Pain Medicine, University of Texas MD Anderson Cancer Center, Houston, TX, US; Department of Integrative Biology and Pharmacology, University of Texas Health Science Center at Houston, Houston, TX, US; Department of Anesthesiology and Pain Medicine, University of Texas MD Anderson Cancer Center, Houston, TX, US

Language: English

Abstract: Opioid-based analgesics are widely used for treating chronic pain, but opioids are highly addictive when repeatedly used because of their strong rewarding effects. In recent years, abuse of prescription opioids has dramatically increased, including incidences of misuse of opioid drugs prescribed for pain control. Despite this issue in current clinical pain management, it remains unknown how pain influences the abuse liability of prescription opioids. Pain as aversive experience may affect opioid reward of positive emotion through common brain sites involved in emotion processing. In this study, on a rat model of chronic pain, we determined how persistent pain altered behavioral responses to morphine reward measured by the paradigm of unbiased conditioned place preference (CPP), focusing on GABAergic synaptic activity in neurons of the central nucleus of the amygdala (CeA), an important brain region for emotional processing of both pain and reward. We found that pain reduced the minimum number of morphine-conditioning

sessions required for inducing CPP behavior. Both pain and morphine conditioning that elicited CPP inhibited GABA synaptic transmission in CeA neurons. Pharmacological activation of CeA GABAA receptors reduced the pain and inhibited CPP induced both by an effective dose of morphine and by a sub-threshold dose of morphine under pain condition. Furthermore, inhibition of CeA GABAA receptors mimicked the pain effect, rendering the sub-threshold dose of morphine effective in CPP induction. These findings suggest that pain facilitates behavioral responses to morphine reward by predisposing the inhibitory GABA function in the CeA circuitry involved in the behavior of opioid reward. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drugs](#)
[*Morphine](#)
[*Rewards](#)
[Animal Models](#)
[Behavior](#)
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129. Cognitive impairment in cocaine users is drug-induced but partially reversible: Evidence from a longitudinal study.

Citation: Neuropsychopharmacology, August 2014, vol./is. 39/9(2200-2210), 0893-133X;1740-634X (Aug 2014)

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Language: English

Abstract: Cocaine users consistently display cognitive impairments. However, it is still unknown whether these impairments are cocaine-induced and if they are reversible. Therefore, we examined the relation between changing intensity of cocaine use and the development of cognitive functioning within 1 year. The present data were collected as part of the longitudinal Zurich Cocaine Cognition Study (ZuCo(2)St). Forty-eight psychostimulant-naïve controls and 57 cocaine users (19 with increased, 19 with decreased, and 19 with unchanged cocaine use) were eligible for analysis. At baseline and after a 1-year follow-up, cognitive performance was measured by a global cognitive index and four neuropsychological domains (attention, working memory, declarative memory, and executive functions), calculated from 13 parameters of a broad neuropsychological test battery. Intensity of cocaine use was objectively determined by quantitative 6-month hair toxicology at both test sessions. Substantially increased cocaine use within 1 year

(mean +297%) was associated with reduced cognitive performance primarily in working memory. By contrast, decreased cocaine use (-72%) was linked to small cognitive improvements in all four domains. Importantly, users who ceased taking cocaine seemed to recover completely, attaining a cognitive performance level similar to that of the control group. However, recovery of working memory was correlated with age of onset of cocaine use—early-onset users showed hampered recovery. These longitudinal data suggest that cognitive impairment might be partially cocaine-induced but also reversible within 1 year, at least after moderate exposure. The reversibility indicates that neuroplastic adaptations underlie cognitive changes in cocaine users, which are potentially modifiable in psychotherapeutic or pharmacological interventions. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Cognitive Impairment](#)
[*Drug Usage](#)
[Cognitive Ability](#)
[Performance](#)
[Short Term Memory](#)

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Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

130. A molecular profile of cocaine abuse includes the differential expression of genes that regulate transcription, chromatin, and dopamine cell phenotype.

Citation: Neuropsychopharmacology, August 2014, vol./is. 39/9(2191-2199), 0893-133X;1740-634X (Aug 2014)

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Language: English

Abstract: Chronic drug abuse, craving, and relapse are thought to be linked to long-lasting changes in neural gene expression arising through transcriptional and chromatin-related mechanisms. The key contributions of midbrain dopamine (DA)-synthesizing neurons throughout the addiction process provide a compelling rationale for determining the drug-induced molecular changes that occur in these cells. Yet our understanding of these processes remains rudimentary. The postmortem human brain constitutes a unique resource that can be exploited to gain insights into the pathophysiology of complex disorders such as drug addiction. In this study, we analyzed the profiles of midbrain gene expression in chronic cocaine abusers and well-matched drug-free control subjects using microarray and quantitative PCR. A small number of genes exhibited robust differential expression; many of these are involved in the regulation of transcription, chromatin, or DA cell phenotype. Transcript abundances for approximately half of these differentially

expressed genes were diagnostic for assigning subjects to the cocaine-abusing vs control cohort. Identification of a molecular signature associated with pathophysiological changes occurring in cocaine abusers' midbrains should contribute to the development of biomarkers and novel therapeutic targets for drug addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Dopamine](#)
[*Drug Abuse](#)
[*Drug Addiction](#)
[Gene Expression](#)
[Genes](#)
[Phenotypes](#)

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Full Text: Available from *Nature Publishing Group NHS Pilot 2014 (NESLi2)* in *Neuropsychopharmacology*; Note: ; Collection notes: Academic-License

131. Psychiatric and neurologic risk factors for incident cases of new-onset epilepsy in older adults: Data from U. S. Medicare beneficiaries.

Citation: *Epilepsia*, July 2014, vol./is. 55/7(1120-1127), 0013-9580;1528-1167 (Jul 2014)

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Language: English

Abstract: Objective: Neurologic diseases such as stroke are risk factors for new-onset epilepsy in older adults. Recent evidence suggests that psychiatric disorders independently predict epilepsy in older male veterans. Our aim was to examine the relationship between these disorders in a population-based study of older adults that also included women and minorities. Methods: We used a national 5% random sample of 2005 Medicare beneficiaries including all 50 US states and Washington, DC. Beneficiaries were 65 years of age or older, with continuous Medicare Part A and Part B coverage and not in managed care plans. Epilepsy cases were identified from claims for physician visits, hospitalizations, and outpatient procedures. We used logistic regressions for the overall sample and stratified by gender to determine whether risk of new-onset epilepsy was associated with prior history of psychiatric (i.e., depression, psychosis, bipolar disorder, schizophrenia, posttraumatic stress disorder (PTSD), adjustment disorder, and substance abuse/dependence) and neurologic conditions (i.e., cerebrovascular disease, dementia, traumatic brain injury, brain tumor, metastatic cancer). Results: Preexisting psychiatric disorders were significantly associated with new-onset epilepsy in the study population as were the neurologic conditions evaluated. Five of the seven psychiatric disorders examined were independently associated with new-onset epilepsy; substance abuse, psychosis, bipolar disorder, schizophrenia, and depression. Gender interaction effects were found for substance abuse/dependence and brain tumors. Significance: Both neurologic and psychiatric factors significantly predicted new-onset epilepsy in a

population-based sample of male and female older adults. These results support earlier findings and extend the understanding of risk models for new-onset epilepsy in broader older adult populations. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: International League Against Epilepsy; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Aging](#)
[*Epilepsy](#)
[*Risk Factors](#)
[Cerebrovascular Disorders](#)
[Dementia](#)
[Drug Abuse](#)
[Major Depression](#)
[Mental Disorders](#)
[Psychosis](#)

Source: PsycINFO

Full Text: Available from *Wiley* in [Epilepsia](#)

132. The causes and consequences of workaholism.

Citation: Gender in organizations: Are men allies or adversaries to women's career advancement?, 2014(171-190) (2014)

Author(s): Aziz, Shahnaz; Uhrich, Benjamin

Institution: East Carolina University, Greenville, NC, US; University of North Carolina, Charlotte, NC, US

Language: English

Abstract: (from the chapter) The term 'workaholism' was first used by Oates (1971), who described it as the 'addiction to work, the compulsion or the uncontrollable need to work incessantly'. Since then, researchers have attempted to refine the definition with mixed results. Contrary to the commonly held belief that workaholics are desirable employees, most researchers today see workaholism as having negative effects on both the employee and the organization. Many researchers have focused on developing a better understanding of the antecedents and correlates of workaholism in order to predict and understand its consequences. Clearly, more research is needed in this area in order to minimize the negative impact of workaholism. In this chapter, we will first provide an overview of workaholism, followed by a discussion on the antecedents and consequences of workaholism, and, finally, a brief synopsis on workaholism's association with gender. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Organizations](#)
[*Personnel](#)
[*Work \(Attitudes Toward\)](#)
[*Workaholism](#)

Source: PsycINFO

133. Substance abuse.

Citation: Neuroscience for social work: Current research and practice., 2014(217-234) (2014)

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Language: English

Abstract: (from the chapter) Substance addiction is a biopsychosocial challenge in living characterized by impairment in three primary areas of brain-behavior functioning: (a) motivation/reward system; (b) learning and memory processing; and (c) impulsivity and behavioral control (Goodman, 2008). Active addiction impairs cognitive control capacity and reduces willful behavioral control in the presence of drug stressor cues. Drug use causes significant dysregulation in the brain's reward system. For example, Hester and Caravan (2009) examined the executive functioning (attention) capacity of 16 active cocaine users when presented with drug and neutral stimuli in a functional MRI (fMRI) scanner. Participants showed decreased attentional control when presented with background cocaine images, and were "distracted" by the drug-related stimuli, which affected their ability to focus on the high-demand cognitive task in the scanner. Other researchers have found that substance-dependent individuals (cocaine and methamphetamine) showed impairment in decision-making ability, working memory, and cognitive flexibility (van der Plas, Crone, van den Wildenberg, Tranel, & Bechara, 2009). Substance-dependent individuals, therefore, often find themselves in high-risk situations, where relapse is probable, without the ability to marshal executive functioning capacity to suppress the urge to use drugs. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)
[*Drug Abuse](#)
[*Social Casework](#)
[Biopsychosocial Approach](#)

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