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## Search History

- 1. PsycINFO; exp ADDICTION/ OR DRUG ABUSE [+NT]/ OR DRUG USAGE [+NT]/; 35456 results.
- 2. PsycINFO; addict\*.ti,ab; 25722 results.
- 3. PsycINFO; 1 OR 2; 47561 results.

#### 1. Assessing an acquired preparedness model across maladaptive behaviors.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014,

vol./is. 75/2-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Effinger, Jenell

**Institution:** Seattle Pacific U., US

Language: English

**Abstract:** In this study, two Acquired Preparedness Models (APMs) were fitted to two maladaptive

problematic drinkers. In these APMs, the direct impact of emotional vulnerability on lifetime behavior count as well as the indirect impact of emotional vulnerability through explicit motivational cognitions (as measured by the decisional balance) was assessed using ordinary least squares regression with bias-corrected bootstrapped confidence intervals. One hundred and six total participants between the ages of 18-20 took part in this study. The average participant was aged 18.83 years, female and Non-Hispanic White. Of the 106 individuals, 54 endorsed at least one instance of NSSI as measured by the Functional Assessment of Self-Mutilation (FASM; Lloyd, Kelley & Hope, 1997) and 42 met criteria for problematic alcohol consumption (PAC) as indicated by the CRAFFT (Knight et al., 1999). Twenty-four participants met criteria for both behaviors. Participants in the NSSI and co-occurring group had similar levels of emotional vulnerability as retrospectively measured by the Emotional Vulnerability in Childhood measure (EV-Child; Sauer & Baer, 2009) and their levels of emotional vulnerability were significantly higher than those in the no problem behavior and AC group (F (3, 102) = 7.95, p < .05). Results of a mediation analysis conducted to test the APM indicated that in the NSSI group there was an indirect effect of positive expectancies on lifetime behavior count (ab = .53, CI [ .49, 2.59}; however, the direct effect of emotional vulnerability was much stronger (c = 1.54, p < .05). Within the drinking group, there was evidence of a much smaller indirect effect through positive expectancies (ab = .22, CI [.03 to .69] and no evidence of a direct effect of emotional vulnerability (p = .70). This study is novel in several respects. First, it is the first to use an APM within an NSSI sample. Second, it is the first to assess emotional vulnerability within an alcohol using sample and third, it is the first to use an open-ended decisional balance with likert ratings as a measure of positive expectancies. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

behavior groups: non-suicidal self-injury (NSSI) and alcohol consumption among

**Publication Type:** Dissertation Abstract

**Subject Headings:** \*Alcoholism

\*Personality Correlates \*Self Injurious Behavior Alcoholic Beverages

Suicide

**Source:** PsycINFO

# 2. The functional and structural neural connectivity of affective processing in alcohol dependence: A multimodal imaging study.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014,

vol./is. 75/2-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Padula, Claudia Beatriz

**Institution:** U Cincinnati, US

Language: English

**Abstract:** Previous studies have demonstrated a role for affective processing deficits in the

development and maintenance of alcohol dependence (AD) and research has shown that prolonged problematic drinking behaviors have global effects on brain structure and function, including frontolimbic regions underlying affective processing. However, no study to date has examined both functional (fcMRI) and underlying structural

connectivity during affective processing in AD. Therefore, the aim of the current study

was to characterize fcMRI of brain regions underlying affective processing in individuals with AD and healthy controls. The secondary aim was to determine whether white matter integrity predicts fcMRI in AD. Fourteen abstinent individuals with AD and 14 controls were included in this IRB-approved study. AD participants met criteria for AD in sustained, partial, or full remission; controls had no substance use disorders history. All diagnostic criteria were confirmed by clinical diagnostic interview. The facial affective processing task included fearful and happy expressions. Anatomical, functional, and diffusion tensor imaging data were collected and pre-processed according to previously established protocols. A psychophysiological interaction, fcMRI analysis was then conducted to assess whether the time-series activity in bilateral amygdala seed regions predicted activation in the rest of the brain during fearful and happy faces. In the 14 individuals with AD, functional anisotropy (FA) was calculated to measure white matter integrity. Independent samples t-tests were computed in AFNI to determine fcMRI clusters groups differences and follow up linear regression analyses were conducted in SPSS to include covariates and determine if FA predicted degree of fcMRI in AD. Fearful faces analyses revealed reduced fcMRI compared to controls between left amygdala and left precuneus, right precuneus, right middle frontal gyrus, left postcentral gyrus, right lingual gyrus, right fusiform gyrus, left fusiform gyrus, right middle temporal gyrus, right superior frontal gyrus, and right angular gyrus. Similarly, during happy face processing, the AD group demonstrated reduced fcMRI with the left amygdala and right paracentral gyrus. Additionally, white matter integrity predicted fcMRI in the AD group. As predicted, during fearful faces, increased FA predicted increased fcMRI in four regions. Surprisingly, increased FA also predicted decreased fcMRI in nine regions during fearful faces. One increased FA tract predicted increased fcMRI during happy faces. In conclusion, this study demonstrated AD was related to decreased fcMRI between left amygdala and various cortical regions during fearful and happy faces compared with controls. Additionally, white matter integrity in AD significantly predicted increased and decreased fcMRI during the task. Aberrant neural networks may relate to AD and structural markers may be one mechanism for observed differences. Results also suggest that inhibitory networks may be related to affective processing in AD. Future studies will examine the relationship between fcMRI and structural connectivity to behavioral indices. Longitudinal studies will determine the directionality of observed relationships and provide intervention direction. Interventions aimed at prevention are most effective, such as affective processing training or social cognition skills in adolescence when most problematic drinking behaviors begin. Additionally, new interventions are emerging in addiction research, which increase cortical and decrease limbic activation. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

Subject Headings: \*Adolescent Development

\*Amygdala

\*Drinking Behavior
\*Intervention
\*White Matter
Alcoholism

Alzheimer's Disease

Integrity

Source: PsycINFO

## 3. Exploring attachment and defense style effects on the self-reflective ability among individuals with addictive disorders.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014,

vol./is. 75/2-B(E)(No Pagination Specified), 0419-4217 (2014)

Author(s): Church, Cara

**Institution:** Fielding Graduate U., US

Language: English

Abstract:

This study included 219 participants, consisting of 104 participants from a methadone maintenance program and 115 participants from an outpatient drug-free program (46% females and 54% males). The Experiences in Close Relationships-Revised was used as a measure for attachment security and assessed the two dimensions of avoidance and anxiety. The Defense Style Questionnaire-88 was used as a measure to evaluate defense mechanisms through conscious derivatives of defenses. The Observing Ego Function Scale was used as a measure of the self-reflective function. Multivariate analyses of variance, analyses of variance, and discriminant function analyses revealed that attachment style and defenses used impacted self-reflective capacity. The drug-free group demonstrated greater use of non-factor and adaptive defenses and the methadone group showed greater use of inhibition, regression, and the immature/maladaptive style. Significant interactive effects were found among the drug-free, dismissing, and avoidant defenses (suppression, withdrawal, and isolation). Those in the dismissing methadone group showed greater use of an immature/maladaptive defense style and regression. An interaction was found between methadone, fearful attachment style, and an immature/maladaptive defense style. Supplemental analyses revealed that not clean participants in both groups had more immature/maladaptive defenses, regression, and inhibition. A significant relationship was found between defenses and self-reflection. The immature/maladaptive defense style significantly related to all aspects of self-reflection. Regression related to impaired self-reflection. The ability to experience affect related to immature/maladaptive and adaptive defenses, regression, splitting, and suppression. Internal awareness related to the immature/maladaptive defense style, and use of inhibition, withdrawal, and splitting. Significant relationships were found between attachment style and self-reflection. The drug-free dismissing group had less ability to experience affect, but overall greater self-reflective ability and impulse control. The methadone dismissing group had greater ability to experience affect, more impulsivity, but less overall self-reflective ability. The drug-free fearful group had greater ability to distance the self without becoming overwhelmed by affect and resulted in overall greater self-reflective ability. The fearful methadone group demonstrated less ability to distance the self without becoming overwhelmed by affect, but resulted in less self-reflective ability. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** \*Ability

\*Human Females
\*Methadone

\*Methadone Maintenance

\*Outpatients

Defense Mechanisms Personality Traits

**Source:** PsycINFO

4. Criminal history and LSI-R scores of RSAT participants in the state of Massachusetts: Impact of offender age on program completion and rates of offender recidivism.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014,

vol./is. 75/2-B(E)(No Pagination Specified), 0419-4217 (2014)

Author(s):Hankins, Jewell EInstitution:Walden U., US

**Language:** English

**Abstract:** The purpose of this study was to understand how offender age impacted residential

substance abuse treatment (RSAT) program success in reducing rates of recidivism for offenders exiting the judicial system. Despite passing legislation in the 1980s and 1990s, which increased the penalties for certain crimes, offender recidivism remains high, with no apparent drop in the number of incarcerations and re-incarcerations, resulting in high costs and threats to the safety and quality of life experienced within communities. Social learning theory, behavioral decision theory, and biologically based theories of behavior were the theoretical foundations. Archival data collected from a RSAT grant program at

between January 1, 1999 and June 6, 2001 were examined. Data related to participant scores on the Level of Service Inventory Revised (LSI-R), acquired prior to program placement and upon program completion, were compared with the number of incarcerations before and after program completion; charges for convictions already decided and/or pending convictions, age at admission(s) and age at the time of the offender's first offense, and types of offenses (domestic or sexual) committed were explored in a factor analysis. Negative correlations identified included: sex offenders and their age at admission and between LSI-R scores and completing the RSAT program. Positive correlations identified included: new convictions and completing the RSAT program, age at admission to program and age of first offense, and date of first offense and sex offender variables. Implications for positive social change include reduced rates of recidivism among offenders with substance abuse problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** \*Age Differences

\*Criminal Behavior \*Decision Making \*Decision Theory Drug Abuse Recidivism

Source: PsycINFO

#### 5. Examining alcohol dependence and its correlates from a genetically informative perspective.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014,

vol./is. 75/2-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Hack, Laura Michele

**Institution:** Virginia Commonwealth U., US

Language: English

**Abstract:** Alcohol dependence (AD) is a serious and common public health problem that

contributes to great societal, medical, and legal costs. It has taken work from multiple disciplines, including developmental psychology, genetic epidemiology, and molecular genetics, to achieve our current understanding of environmental and genetic risk factors for AD as well as its variable developmental trajectories. Nevertheless, there is still much to be learned in order to improve treatment outcomes. One approach to augmenting our understanding of this disorder is through genetically informative study designs that either examine risk in aggregate or assess specific susceptibility variants. In this dissertation, we utilize both study designs and provide support for the idea that they are both important and useful approaches to continue to pursue. (PsycINFO Database Record (c) 2014 APA,

all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** \*Alcoholism

\*Public Health
\*Risk Factors
Treatment Outcomes

Source: PsycINFO

#### 6. Neurotoxic effects of methamphetamine on dopamine signaling.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014,

vol./is. 75/2-B(E)(No Pagination Specified), 0419-4217 (2014)

Author(s): Howard, Christopher D
Institution: Illinois State U., US

Language: English

Abstract:

Methamphetamine (METH) is a highly addictive and neurotoxic psychostimulant that is commonly abused. METH abusers display long-term changes in the brain, including reduction of dopamine (DA) innervation in dorsal and ventral striatum. Additionally, METH use is associated with long term cognitive impairments, including deficits in fine and gross motor control, learning, and memory. While cognitive impairments have been associated with DA denervation in the striatum of both human METH abusers and animal models treated with a 'binge' dose of METH that demonstrate similar changes in DA content, no clear mechanism has been outlined linking DA denervation and cognitive impairments. The goals of this work are two-fold. First, I aim to characterize changes in DA signaling following partial DA depletion caused by METH pretreatment. Second, I aim to restore deficits in DA signaling caused by METH pretreatment through the use of both electrical stimulation and pharmacological interventions. Here, I demonstrate that METH neurotoxicity reduces phasic DA signaling, which is important in cue-reward learning, and that sufficient DA innervation exists to recover normal phasic DA signaling following METH pretreatment. Changes in electrically-evoked phasic DA signals were characterized in anesthetized rats pretreated with METH. Additionally, using a freely-behaving rat preparation, I demonstrate reduced amplitude and frequency of endogenous phasic DA signals throughout the striatum. I then show that driving phasic DA signaling in remaining DA terminals through electrical stimulation of DA axons remediates well characterized deficits in striatal gene expression following METH pretreatment. Using the synthetic precursor for DA, levodopa, I demonstrate pharmacological remediation of phasic signal deficits, which may be a means of restoring normal cognitive functions in recovering METH abusers. Lastly, I investigate the mechanism of acute, low doses of METH and their ability to drive phasic signaling following METH neurotoxicity. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Dissertation Abstract

\*Dopamine

\*Methamphetamine \*Motor Processes Animal Models Neurotoxicity

\*Cognitive Impairment

Rats

**Source:** PsycINFO

**Subject Headings:** 

#### 7. Underestimation of substance abuse in psychiatric patients by conventional hospital screening.

Citation: Journal of Psychiatric Research, September 2014(No Pagination Specified), 0022-3956

(Sep 10, 2014)

Author(s): Reidy, Lisa J; Junquera, Patricia; Van Dijck, Karolien; Steele, Bernard W; Nemeroff,

Charles B

**Abstract:** Psychiatric diagnosis mainly relies on behavioral signs and symptoms. Substance abuse

complicate the management of psychiatric patients. The reliability and accuracy of urine toxicology is a vital tool in the optimal treatment of these patients. Current demographics of substance abuse suggest that in addition to the most conventional drugs of abuse (e.g. cocaine, cannabis) that are of concern to treating physicians, prescription medications and new designer drugs also should be when evaluating patients who present with symptoms of psychosis/drug addiction or altered mental status. METHODS: Urine samples from 220 psychiatric inpatients admitted to either an acute drug and alcohol unit or acute psychiatric unit were analyzed for drugs by the standard hospital assay (KIMS) and by a more sensitive ELISA and GC-MS basic drug screening protocol. RESULTS: The standard hospital toxicology (KIMS) was inferior to the ELISA and GC-MS methods in terms of both assay sensitivity and in detecting a broader number of drugs. The KIMS

can mimic the clinical presentation of primary psychiatric disorders and can also

The KIMS screen did not identify zolpidem, buprenorphine and a number of synthetic drugs of abuse including cathinone and tryptamines. CONCLUSION: In order to reliably

tests failed to identify opiates and amphetamine/methamphetamine in 50% of the patients.

identify substance abuse in patients with altered mental status in inpatient settings, analytical methodologies with adequate assay sensitivity and range to detect the vast majority of commonly abused illicit drugs and prescription medications are required for optimal clinical assessment and treatment. (PsycINFO Database Record (c) 2014 APA, all

rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** 

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Journal of Psychiatric Research* 

8. Outcomes following treatment of veterans for substance and tobacco addiction.

Citation: Archives of Psychiatric Nursing, August 2014(No Pagination Specified), 0883-9417 (Aug

20, 2014)

**Author(s):** Vest, Bridgette Helms; Kane, Catherine; DeMarce, Josephine; Barbero, Edie; Harmon,

Rebecca; Hawley, Joanne; Lehmann, Lauren

**Abstract:** Persons who use tobacco in addition to alcohol and other drugs have increased health

risks and mortality rates. The purpose of this study was to evaluate the impact of participation in a tobacco cessation program on tobacco, alcohol, and other drug use in a population seeking treatment for substance use disorders (SUDs). Tobacco, alcohol, and other drug use were assessed by urine drug screens, breathalyzer readings, and self-report. Veterans (N=137) with a tobacco use disorder enrolled in inpatient program for the treatment of SUDs at the Salem Veterans Affairs Medical Center participated in tobacco cessation education as part of their treatment programming. Use of tobacco, drugs and/or alcohol was evaluated upon admission, 2weeks following admission, at discharge and 1month following graduation. The 1-month follow-up rate was 70.8%, with 97 veterans completing the follow-up assessment. Of those 97 veterans, 90.7% (n=88) reported abstinence from alcohol and 91.8% (n=89) reported abstinence from other drugs of abuse. Fourteen veterans (14.4%) reported abstinence from tobacco at the 1-month follow-up. The veterans reporting abstinence from tobacco use also reported abstinence from alcohol and other drugs at the 1-month follow-up. (PsycINFO Database Record (c) 2014 APA, all

rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** 

**Source:** PsycINFO

9. Fronto-striatal circuits in response-inhibition: Relevance to addiction.

Citation: Brain Research, September 2014(No Pagination Specified), 0006-8993 (Sep 16, 2014)

Author(s): Morein-Zamir, Sharon; Robbins, Trevor W

**Abstract:** Disruptions to inhibitory control are believed to contribute to multiple aspects of drug

abuse, from preexisting vulnerability in at-risk individuals, through escalation to dependence, to promotion of relapse in chronic users. Paradigms investigating the suppression of actions have been investigated in animal and human research on drug addiction. Rodent research has focused largely on impulsive behaviors, often gauged by premature responding, as a viable model highlighting the relevant role of dopamine and other neurotransmitters primarily in the striatum. Human research on action inhibition in stimulant dependence has highlighted impaired performance and largely prefrontal cortical abnormalities as part of a broader pattern of cognitive abnormalities. Animal and human research implicate inhibitory difficulties mediated by fronto-striatal circuitry both preceding and as a result of excessive stimulus use. In this regard, response-inhibition has proven a useful cognitive function to gauge the integrity of fronto-striatal systems and their role in contributing to impulsive and compulsive features of drug dependence. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database

Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** 

Source: PsycINFO

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

10. Reduced cocaine-induced serotonin, but not dopamine and noradrenaline, release in rats with a genetic deletion of serotonin transporters.

Citation: European Neuropsychopharmacology, September 2014(No Pagination Specified),

0924-977X (Sep 16, 2014)

**Author(s):** Verheij, Michel M.M; Karel, Peter; Cools, Alexander R; Homberg, Judith R

**Abstract:** It has recently been proposed that the increased reinforcing properties of cocaine and

ecstasy observed in rats with a genetic deletion of serotonin transporters are the result of a reduction in the psychostimulant-induced release of serotonin. Here we provide the neurochemical evidence in favor of this hypothesis and show that changes in synaptic levels of dopamine or noradrenaline are not very likely to play an important role in the previously reported enhanced psychostimulant intake of these serotonin transporter knockout rats. The results may very well explain why human subjects displaying a reduced expression of serotonin transporters have an increased risk to develop addiction.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** 

Source: PsycINFO

Full Text: Available from Elsevier in European Neuropsychopharmacology

11. Change in consumption patterns for treatment-seeking patients with alcohol use disorder post-bariatric surgery.

Citation: Journal of Psychosomatic Research, September 2014(No Pagination Specified),

0022-3999 (Sep 7, 2014)

Author(s): CuellarBarboza, Alfredo B; Frye, Mark A; Grothe, Karen; Prieto, Miguel L; Schneekloth,

Terry D; Loukianova, Larissa L; Daniel K., Hall-Flavin; Clark, Matthew M; Karpyak,

Victor M; Miller, Joseph D; Abulseoud, Osama A

**Abstract:** OBJECTIVE: The aim of this study is to describe the clinical phenotype of alcohol use

disorder (AUD) treatment-seeking patients with Roux-en-Y Gastric Bypass Surgery (RYGB) history; and to compare it to AUD obese non-RYGB controls. METHODS: Retrospective study of electronic medical records for all patients 30-60years treated at the

Mayo Clinic Addiction Treatment Program, between June, 2004 and July, 2012. Comparisons were performed with consumption patterns pre-RYGB and at time of treatment; excluding patients with AUD treatments pre-RYGB. RESULTS: Forty-one out of 823 patients had a RYGB history (4.9%); 122 controls were selected. Compared to controls, the RYGB group had significantly more females [n=29 (70.7%) vs. n=35 (28.7%) p<0.0001]; and met AUD criteria at a significantly earlier age (19.1+0.4 vs. 25.0+1 years old, p=0.002). On average, RYGB patients reported resuming alcohol consumption 1.4+0.2 years post-surgery, meeting criteria for AUD at 3.1+0.5 years and seeking treatment at 5.4+0.3 years postoperatively. Pre-surgical drinks per day were significantly fewer compared to post-surgical consumption [2.5+0.4 vs. 8.1+1.3, p=0.009]. Prior to admission, RYGB patients reported fewer drinking days per week vs.

controls (4.7+0.3 vs. 5.5+1.8days, p=0.02). Neither RYGB, gender, age nor BMI was associated with differential drinking patterns. CONCLUSION: The results of this study suggest that some patients develop progressive AUD several years following RYGB. This observation has important clinical implications, calling for AUD-preventive measures following RYGB. Further large-scale longitudinal studies are needed to clarify the association between RYGB and AUD onset. (PsycINFO Database Record (c) 2014 APA,

all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** 

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Journal of Psychosomatic Research* 

12. Inhibition of apomorphine-induced conditioned place preference in rats co-injected with buspirone: Relationship with serotonin and dopamine in the striatum.

Citation: Brain Research, August 2014(No Pagination Specified), 0006-8993 (Aug 23, 2014)

Author(s): Haleem, Darakhshan Jabeen; Ikram, Huma; Haleem, Muhammad Abdul

**Abstract:** Apomorphine is a non-narcotic derivative of morphine, which acts as a dopamine agonist

to produce psychostimulant like effects. Currently, apomorphine is used in patients with advanced Parkinson's disease, for the treatment of persistent and disabling motor fluctuations, but a constellation of addictive syndromes such as excessive over use of medication, compulsive behaviors, and disturbances of impulse control are noticed in certain patients. Research on rodent models using conditioned place preference (CPP) paradigm also shows that the drug is rewarding. Previously we have shown that repeated administration of apomorphine produces behavioral sensitization which is prevented in rats co-injected with a low (1.0mg/kg) but not higher (2.0mg/kg) dose of buspirone. The present study shows that rewarding effects of apomorphine (1.0mg/kg) in a CPP paradigm are also blocked in rats co-injected with a low (1.0mg/kg) but not higher (2.0mg/kg) dose of buspirone. The levels of serotonin and its metabolite are decreased in the caudate as well as nucleus accumbens of rats exhibiting CPP and the decreases do not occur in animals co-injected with low or higher dose of buspirone. The levels of dopamine and its metabolites are not affected in animals exhibiting CPP; administration as well as co-administration of higher dose of buspirone decreased dopamine metabolism in the caudate as well as nucleus accumbens. The findings suggest a critical role of serotonin in the rewarding effects of apomorphine and imply that co-use of buspirone at low doses can help to control addictive syndromes in Parkinson's disease patients on apomorphine therapy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** 

Source: PsycINFO

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

13. Delay discounting, treatment motivation and treatment retention among substance-dependent individuals attending an in inpatient detoxification program.

Citation: Journal of Substance Abuse Treatment, September 2014(No Pagination Specified),

0740-5472 (Sep 1, 2014)

**Author(s):** Stevens, Laura; Verdejo-Garcia, Antonio; Roeyers, Herbert; Goudriaan, Anna E;

Vanderplasschen, Wouter

**Abstract:** BACKGROUND: Recent studies consistently indicate high rates of delay discounting in

drug users, which refers to a strong tendency to devaluate delayed rewards. Many addiction treatment programs however, place high demands on the ability to postpone immediate gratification. Therefore, these programs may be particularly challenging for drug users who are disproportionally oriented towards the present, potentially leading to a drop in their treatment involvement. Still, few studies to date have looked at whether delay discounting in drug users is associated with poorer treatment motivation or shorter treatment retention (i.e., the length of stay in treatment). METHOD: In the current study, we examined whether delay discounting, as measured shortly following treatment entry, was predictive of poor treatment retention among 84 substance-dependent individuals (SDI) attending an inpatient detoxification program. In addition, we examined whether motivation for treatment would act as a mediator of this relationship. RESULTS: Delay discounting was predictive of shorter treatment retention and higher odds of dropping out of treatment prematurely. The effects of delay discounting on treatment retention were partially mediated by a subcomponent of treatment motivation, i.e., treatment readiness.

CONCLUSION: The propensity to more steeply discount delayed rewards in drug users has the potential to become a clinically relevant behavioral marker, alerting clinicians that these clients may exhibit lower treatment readiness and are more likely to drop out of treatment prematurely. Targeting delay discounting or increasing treatment readiness in drug users with a low tolerance for delay-of-gratification may help to improve treatment retention among these individuals. (PsycINFO Database Record (c) 2014 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

14. Evidence base on outpatient behavioral treatments for adolescent substance use: Updates and recommendations 2007-2013.

**Citation:** Journal of Clinical Child and Adolescent Psychology, September 2014, vol./is.

43/5(695-720), 1537-4416;1537-4424 (Sep 2014)

Author(s): Hogue, Aaron; Henderson, Craig E; Ozechowski, Timothy J; Robbins, Michael S

**Correspondence Address:** Hogue, Aaron: Treatment Research Division, National Center on Addiction and

Substance Abuse at Columbia University, 633 Third Avenue, 19th Floor, New York, NY,

US, 10017, ahogue@casacolumbia.org

**Institution:** National Center on Addiction and Substance Abuse at Columbia University, New York,

NY, US; Department of Psychology, Sam Houston State University, Huntsville, TX, US;

Oregon Research Institute, OR, US; Oregon Research Institute, OR, US

Language: English

**Abstract:** This article updates the evidence base on outpatient behavioral treatments for adolescent

substance use (ASU) since publication of the previous review completed for this journal by Waldron and Turner (2008). It first summarizes the Waldron and Turner findings as well as those from more recent literature reviews and meta-analytic studies of ASU treatment. It then presents study design and methods criteria used to select 19

comparative studies subjected to Journal of Clinical Child & Adolescent Psychology level of support evaluation. These 19 studies are grouped by study category (efficacy or effectiveness) and described for sample characteristics, methodological quality, and substance use outcomes. Cumulative level of support designations are then made for each

identified treatment approach: ecological family-based treatment, group

cognitive-behavioral therapy, and individual cognitive-behavioral therapy are deemed Well Established; behavioral family-based treatment and motivational interviewing are deemed Probably Efficacious; drug counseling is deemed Possibly Efficacious; and four integrated treatment models combining more than one approach are deemed Well Established or Probably Efficacious. The remainder of the article (a) articulates fidelity, mediator, and moderator effects reported for evidence-based approaches since 2008 and (b) recommends four enhancements to the prevailing business model of ASU outpatient services to accelerate penetration of evidence-based approaches into the underserved consumer base: pursue partnerships with influential governmental systems, utilize web-based technology to extend reach and control costs, adapt effective methods for

linking services across sectors of care, and promote uptake and sustainability by emphasizing return on investment. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Behavior Modification

\*Drug Abuse

\*Drug Rehabilitation \*Evidence Based Practice \*Outpatient Treatment Adolescent Development

Source: PsycINFO

15. Effect of social support on depression of internet addicts and the mediating role of loneliness.

Citation: International Journal of Mental Health Systems, August 2014, vol./is. 8/, 1752-4458 (Aug

16, 2014)

**Author(s):** He, Fei; Zhou, Qin; Li, Jing; Cao, Rong; Guan, Hao

Correspondence Address: He, Fei, guanhaofmmu@126.com

**Institution:** School of Public Management, Northwest University, Xi'an, China; Department of Burns

and Cutaneous Surgery, Xijing Hospital, Xi'an, China; School of Public Management, Northwest University, Xi'an, China; School of Public Management, Northwest University, Xi'an, China; Department of Burns and Cutaneous Surgery, Xijing Hospital, Xi'an, China

Language: English

**Abstract:** Background: Many studies have determined the existence of an extremely close

association between Internet addiction and depression. However, the reasons for the depression of Internet addicts have not been fully investigated. Aim: This cross-sectional study aims to explore the factors that influence depression among Internet addicts. Methods: A total of 162 male Internet addicts completed the Emotional and Social Loneliness Scale, Multidimensional Scale of Perceived Social Support, and Self-Rating Depression Scale. Results: Loneliness and lack of social support are significantly correlated with depression among Internet addicts. Structural Equation Modeling results indicate that social support partially mediates loneliness and depression. Conclusions: Both social support and loneliness were negatively associated with depression of Internet addicts whereas loneliness plays a mediating role between social support and depression. (PsycINFO Database Record (c) 2014 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/4.0), 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; He et al.; licensee BioMed

Central Ltd.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Internet Addiction

\*Loneliness

\*Major Depression \*Social Support

**Source:** PsycINFO

Full Text: Available from National Library of Medicine in International Journal of Mental Health

Systems

Available from *ProQuest* in *International Journal of Mental Health Systems*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland"

in the drop down list of institutions.

Available from BioMedCentral in International Journal of Mental Health Systems

16. Longitudinal trajectories and associated baseline predictors in youths with bipolar spectrum disorders.

Citation: The American Journal of Psychiatry, September 2014, vol./is. 171/9(990-999),

0002-953X;1535-7228 (Sep 1, 2014)

Author(s): Birmaher, Boris; Gill, Mary Kay; Axelson, David A; Goldstein, Benjamin I; Goldstein,

Tina R; Yu, Haifeng; Liao, Fangzi; Iyengar, Satish; Diler, Rasim S; Strober, Michael; Hower, Heather; Yen, Shirley; Hunt, Jeffrey; Merranko, John A; Ryan, Neal D; Keller,

Martin B

**Institution:** Department of Psychiatry, Western Psychiatric Institute and Clinic, University of

Pittsburgh Medical Center, Pittsburgh, PA, US

Language: English

**Abstract:** Objective: The authors sought to identify and evaluate longitudinal mood trajectories and

associated baseline predictors in youths with bipolar disorder. Method: A total of 367 outpatient youths (mean age, 12.6 years) with bipolar disorder with at least 4 years of follow-up were included. After intake, participants were interviewed on average 10 times (SD=3.2) over a mean of 93 months (SD=8.3). Youths and parents were interviewed for psychopathology, functioning, treatment, and familial psychopathology and functioning.

Results: Latent class growth analysis showed four different longitudinal mood trajectories: "predominantly euthymic" (24.0%), "moderately euthymic" (34.6%), "ill with improving course" (19.1%), and "predominantly ill" (22.3%). Within each class, youths were euthymic on average 84.4%, 47.3%, 42.8%, and 11.5% of the follow-up time, respectively. Multivariate analyses showed that better course was associated with higher age at onset of mood symptoms, less lifetime family history of bipolar disorder and

higher age at onset of mood symptoms, less lifetime family history of bipolar disorder an substance abuse, and less history at baseline of severe depression, manic symptoms, suicidality, subsyndromal mood episodes, and sexual abuse. Most of these factors were more noticeable in the "predominantly euthymic" class. The effects of age at onset were attenuated in youths with lower socioeconomic status, and the effects of depression severity were absent in those with the highest socioeconomic status. Conclusions: A substantial proportion of youths with bipolar disorder, especially those with adolescent onset and the above noted factors, appear to be euthymic over extended periods.

Nonetheless, continued syndromal and subsyndromal mood symptoms in all four classes underscore the need to optimize treatment. (PsycINFO Database Record (c) 2014 APA,

all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Adolescent Development

\*Bipolar Disorder
\*Longitudinal Studies

\*Prediction Drug Abuse Emotional States Major Depression Onset (Disorders) Psychiatric Symptoms Psychopathology Sexual Abuse

Socioeconomic Status Suicidal Ideation Family History

**Source:** PsycINFO

#### 17. Symptom outcome in early-onset bipolar disorder: Could be better, could be worse.

Citation: The American Journal of Psychiatry, September 2014, vol./is. 171/9(910-912),

0002-953X;1535-7228 (Sep 1, 2014)

**Author(s):** Carlson, Gabrielle A

Correspondence Address: Carlson, Gabrielle A., gabrielle.carlson@stonybrook.edu

**Institution:** Departments of Psychiatry and Pediatrics, Stony Brook University School of Medicine,

Stony Brook, NY, US

Language: English

**Abstract:** This editorial comments on the article in the current issue by B. Birmaher et al (see record

2014-37845-012). The study of bipolar disorder in children has had its ups and downs. The diagnosis went from almost nonexistent to being so common that the DSM-5 committee felt compelled to sharpen the criteria and add a new diagnosis, disruptive mood dysregulation disorder, to decrease what was thought to be overdiagnosis. The

latest report from the Course and Outcome of Bipolar Youth (COBY) study, by Birmaher et al, also reverses the thinking that childhood-onset bipolar disorder has an invariably gloomy course. Briefly, children ages 7-17 with initially scrupulously diagnosed bipolar I or II disorder or bipolar disorder not otherwise specified were interviewed every 6 months or so about their weekly psychiatric status for the previous 6 months (i.e., prospectively collected retrospective data) for an average follow-up period of 8 years. Their moods and other clinical information were recorded and, for the purposes of this particular study, the presence or absence and the severity of mood symptoms on the mania and depression subscales of the Schedule for Affective Disorders and Schizophrenia for School-Age Children were ascertained. Using latent class growth analysis, a statistical procedure that helps identify homogeneous populations within a larger heterogeneous group, the authors identified four groups of study participants based on their 8-year clinical course. At the extremes were those who were "predominantly euthymic" during most of the followup period (24%) and those where were "predominantly ill" (22.3%). The two inbetween groups were "moderately euthymic" (34.6%) or were "ill with improving course" (19.1%). In fact, the "ill with improving course" group took about 3 years to change trajectories. Using latent class growth analysis to understand the possible range of outcomes is clearly a step forward. However, there are a number of other questions we would like answered: What differences in functional outcomes accompany these symptom groups? How many children have only one or two episodes and remit entirely (as opposed to remaining subsyndromal? What accounts for improvement at around 3 years after an episode in the "improving" group, and does treatment matter? Were index manic episodes in the "predominantly euthymic" group more in keeping with the shorter manic episode durations seen in adults? There is a need to reconcile the differences between studies in order to provide an informed picture of the future of the illness for families concerned with the early onset of a severe mental disorder. We need to know what to say when parents (or young patients) ask whether they will be "sick for the rest of their lives." Perhaps as with cancer, we can give them a comparable "5-year survival rate," hedging a bit depending on how complicated their clinical and psychosocial picture is. What we cannot yet tell them is how to change the trajectory of the illness into the "predominantly euthymic "one--and that, let's face it, is what they really want to know. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Adolescent Development

\*Bipolar Disorder

\*Longitudinal Studies

\*Prediction
Drug Abuse

Sexual Abuse

Emotional States Major Depression Onset (Disorders) Psychiatric Symptoms Psychopathology

Socioeconomic Status Suicidal Ideation Family History

**Source:** PsycINFO

#### 18. Decreased prefrontal cortical dopamine transmission in alcoholism.

Citation: The American Journal of Psychiatry, August 2014, vol./is. 171/8(881-888),

0002-953X;1535-7228 (Aug 1, 2014)

**Author(s):** Narendran, Rajesh; Mason, Neale Scott; Paris, Jennifer; Himes, Michael L; Douaihy,

Antoine B; Frankle, W. Gordon

Correspondence Address: Narendran, Rajesh, narendranr@upmc.edu

**Institution:** Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US

Language: English

**Abstract:** Objective: Basic studies have demonstrated that optimal levels of prefrontal cortical

dopamine are critical to various executive functions such as working memory, attention, inhibitory control, and risk/reward decisions, all of which are impaired in addictive disorders such as alcoholism. Based on this and imaging studies of alcoholism that have demonstrated less dopamine in the striatum, the authors hypothesized decreased dopamine transmission in the prefrontal cortex in persons with alcohol dependence. Method: To test this hypothesis, amphetamine and [C]FLB 457 positron emission

Method: To test this hypothesis, amphetamine and [C]FLB 457 positron emission tomography were used to measure cortical dopamine transmission in 21 recently abstinent persons with alcohol dependence and 21 matched healthy comparison subjects. [C]FLB 457 binding potential, specific compared to nondisplaceable uptake (BP ND), was measured in subjects with kinetic analysis using the arterial input function both before and after 0.5 mg kg 21 of d-amphetamine. Results: Amphetamine-induced displacement of [C]FLB 457 binding potential (DBPND) was significantly smaller in the cortical regions in the alcohol-dependent group compared with the healthy comparison group. Cortical regions that demonstrated lower dopamine transmission in the alcohol-dependent group included the dorsolateral prefrontal cortex, medial prefrontal cortex, orbital frontal cortex, temporal cortex, and medial temporal lobe. Conclusions: The results of this study, for the first time, unambiguously demonstrate decreased dopamine transmission in the cortex in alcoholism. Further research is necessary to understand the clinical relevance of decreased cortical dopamine as to whether it is related to impaired executive function, relapse, and outcome in alcoholism. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Dopamine \*Prefrontal Cortex

\*Cognitive Control
\*Executive Function

Addiction Attention

Decision Making Short Term Memory

Source: PsycINFO

19. Imaging cortical dopamine concentrations, at last! Application to the neurobiology of alcohol dependence.

Citation: The American Journal of Psychiatry, August 2014, vol./is. 171/8(814-817),

0002-953X;1535-7228 (Aug 1, 2014)

**Author(s):** Smith, Gwenn S

Correspondence Address: Smith, Gwenn S., gsmith95@jhmi.edu

**Institution:** Department of Psychiatry and Behavioral Sciences, Johns Hopkins School of Medicine,

Baltimore, MD, US

Language: English

**Abstract:** This editorial of The American Journal of Psychiatry discusses the neurobiology of

alcohol dependence. More specifically it focuses on imaging cortical dopamine concentrations in the brain. (PsycINFO Database Record (c) 2014 APA, all rights

reserved)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Neurobiology \*Neuroimaging

Brain
Dopamine
Psychiatry

**Source:** PsycINFO

20. Substance abuse and dependence among patients attending an emergency hospital in eastern Nile delta, Egypt.

**Citation:** African Journal of Psychiatry, March 2014, vol./is. 17/2(532-537), 1994-8220 (Mar 2014)

Author(s): Amr, Mostafa; El-Gilany, Abdel-Hady; El-Mogy, Ahmed; Fathi, Warda

Correspondence Address: Amr, Mostafa: Mansoura University, Mansoura, Egypt, mostafapsy@yahoo.com

**Institution:** Department of Psychiatry, Mansoura University, Mansoura, Egypt; Department of

Psychiatry, Mansoura University, Mansoura, Egypt; Department of Psychiatry, Mansoura University, Mansoura, Egypt; Department of Psychiatry, Mansoura University, Mansoura,

Egypt

Language: English

**Abstract:** Background: Substance abuse and dependence are frequently encountered in emergency

hospitals. The aims of this study were to estimate the prevalence of drug abuse and dependence among patients attending Emergency Hospitals and to describe the sociodemographic, clinical and psychiatric features of these patients. Secondary aims were to evaluate the type of medical care given to these patients and to assess the predictors of substance abuse and dependence Methods: All 1,526 patients attending the Mansoura emergency hospital during the month of April 2012 were included in this study. Alcohol and illicit drug use were assessed using a questionnaire filled in by the patients and their relatives followed by an interview based on the Arabic version of Mini international neuropsychiatric interview (MINI) for the diagnosis of comorbid psychiatric

international neuropsychiatric interview (MINI) for the diagnosis of comorbid psychiatric disorders. Results: After exclusion of 155 cases, 1,317 patients were included: 108 (8%) with substance abuse and 47(3.5%) with substance dependence. Cannabis was the most common drug abused for 3.6% of patients followed by tramadol and polysubstance in1.8%, 1.7% of patients respectively, whereas, tramadol ranked the first in the

dependence group in 1.2% of patients followed by the cannabi and stimulants in 1% and 0.5% of patients respectively). Multivariate regression analysis showed that being of younger age (< 30 years) (Odds ratio OR = 1.74), male and single with unsatisfactory income (OR = 3.71, 1.59 and 2.66 respectively) and diagnosed with psychiatric illness OR = 2.08) positively predict the abuse status included. Those with status of drug

dependence had features similar to the status of abuse patients except regarding reason for hospital referral and the presence of psychiatric illness. Conclusion: About one in ten of the attendants presented with either substance abuse or dependence. This should be considered during history taking and clinical examination of patients referred to an emergency hospital particularly in male gender, single, younger age group with unsatisfactory income. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Drug Dependency \*Mental Disorders \*Psychiatry

Health Care Services

Hospitals

**Source:** PsycINFO

21. Sleep related beliefs and their association with alcohol relapse following residential alcohol detoxification treatment.

**Citation:** Behavioural and Cognitive Psychotherapy, September 2014, vol./is. 42/5(593-604),

1352-4658;1469-1833 (Sep 2014)

Author(s): Smith, Neil; Hill, Robert; Marshall, Jane; Keaney, Francis; Wanigaratne, Shamil

Correspondence Address: Smith, Neil: Addictions Directorate, Central and North West London NHS Foundation

Trust, Soho Centre for Health and Care, 4th Floor, 1 Frith Street, London, United

Kingdom, W1D 3HZ, nsmith12@nhs.net

**Institution:** Central and North West London NHS Foundation Trust, London, United Kingdom; South

London and Maudsley NHS Foundation Trust, London, United Kingdom; South London and Maudsley NHS Foundation Trust, London, United Kingdom; South London and Maudsley NHS Foundation Trust, London, United Kingdom; College of Medicine and

Health Sciences, Abu Dhabi, United Arab Emirates

**Language:** English

**Abstract:** Background: Alcohol dependence is known to impact upon sleep, and poor sleep has been

shown to affect relapse rates following treatment for alcohol dependence. Aims: The aim of this study was to investigate the association between sleep problems and relapse in dependent drinkers in an inpatient setting. This was done by studying sleep related cognitions in individuals undergoing medically assisted alcohol withdrawal. Method: Sleep and sleep-related cognitions data were collected for 71 individuals undergoing detoxification treatment. Sleep was measured using sleep diaries and actigraph motion monitors. Participants completed sleep-related cognition questionnaires and were subject to telephone follow-up interviews. The results were then used to predict relapse rates 4 weeks after discharge. Results: Longer sleep onset latency recorded on the unit predicted relapse at 4 weeks. Higher dysfunctional beliefs about sleep were found to be associated with lower relapse rates. Conclusions: This study suggests that some dysfunctional beliefs about sleep may support recovery following discharge from treatment. The study further supports the need for tailored cognitive-behavioural treatments for sleep difficulties in this population to reduce relapse rates. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: British Association for Behavioural and Cognitive Psychotherapies; YEAR:

2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Detoxification \*Relapse (Disorders)

\*Sleep Attitudes

**Residential Care Institutions** 

Treatment

**Source:** PsycINFO

22. Recreational drug use and fluctuating asymmetry: Testing the handicap principle.

**Citation:** Evolutionary Psychology, 2014, vol./is. 12/1(769-782), 1474-7049 (2014)

Author(s): Borkowska, Barbara; Pawlowski, Boguslaw

Correspondence Address: Borkowska, Barbara, barbara.borkowska@antropo.uni.wroc.pl

**Institution:** Department of Human Biology, University of Wroclaw, Wroclaw, Poland; Department of

Human Biology, University of Wroclaw, Wroclaw, Poland

Language: English

**Abstract:** Zahavi's handicap principle suggests that only organisms with good genetic quality can

afford to engage in costly behaviors. Recreational drug use can be harmful to one's health and therefore might be viewed as a costly signal of one's genetic quality. One of the measurements of genetic quality is bodily symmetry assessed by fluctuating asymmetry. If unhealthy drug use is a behavioral example of Zahavi's handicap principle, then men who use different stimulants or recreational drugs should be more symmetrical than men who do not use them at all or use them only in low quantity. The aim of this study was to examine the relationships between drug use and fluctuating asymmetry. The subjects were 190 young women and 202 young men. Six bilaterally symmetrical traits were measured: length of II-V digits, wrist breadth, and ear height. Questionnaires included questions about smoking, alcohol drinking, drug use, and designer drug use. There was no relationship between bodily symmetry and smoking frequency, alcohol drinking frequency, drug or designer drug use, total substance use, age of smoking initiation, or

reason of this initiation. The results indicate that drug use does not reflect genetic quality and does not necessarily relate to the handicap hypothesis. (PsycINFO Database Record

(c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Usage

\*Genetics
\*Theories

**Alcohol Drinking Patterns** 

Human Body Morphology Tobacco Smoking

Source: PsycINFO

# 23. Socio-psychological dimensions of mobile phone addiction and usage patterns amongst teenagers in higher institutions of learning in Kwara State.

Citation: International Journal of Information and Communication Technology Education, April

2014, vol./is. 10/2(1-3), 1550-1876;1550-1337 (Apr-Jun 2014)

**Author(s):** Titilope, Afolayan Oluyinka

**Institution:** Department of Information and Communication Science, University of Ilorin, Ilorin,

Nigeria

Language: English

**Abstract:** Mobile phone addiction is now a common phenomenon in the 21st century, especially

among teenagers due to the unusual cravings in the use of technological devices. In view of this phenomenon, the study examined the socio-psychological dimensions of mobile phone addiction and usage patterns amongst teenagers in three Higher Institutions of Learning in Kwara State, Nigeria. Descriptive and inferential statistical tools were utilized to analyze data collected on a sample size of 321 undergraduate teenage students whose

selection were based on simple random sampling technique across three Higher Institutions of Learning which were the University of Ilorin, Kwara state University, and Al-Hikmah University respectively. Findings from the data analyses revealed uniformity in the usage patterns of teenagers in the use of their mobile devices. Significant positive relationships were also established between mobile addiction and socio-psychological dimensions such as loneliness, boredom, egoism, and self-independence at varying

significant levels. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** STATEMENT: Copying or distributing in print or electronic forms without written

permission of IGI Global is prohibited.; HOLDER: IGI Global; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Addiction

\*Higher Education \*Social Influences \*Cellular Phones Technology

**Source:** PsycINFO

#### 24. Intravenous administration and abuse of bupropion: A case report and a review of the literature.

**Citation:** Journal of Addiction Medicine, July 2014, vol./is. 8/4(290-293), 1932-0620;1935-3227

(Jul-Aug 2014)

**Author(s):** Oppek, Kirsten; Koller, Gabriele; Zwergal, Andreas; Pogarell, Oliver

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Language: English

**Abstract:** Introduction: Bupropion is an effective and well-tolerated second-generation

antidepressant generally assumed to be without abuse potential. In the past years, several case reports about the recreational use of bupropion, mainly via nasal insufflation, have been published. Last year, a first case of intravenous bupropion dependence was reported. Case presentation: We present another case of intravenous administration of and

dependence on bupropion in a 29-year-old woman with a history of polysubstance dependence, who consumed an extremely high daily dose of about 2400 mg of bupropion together with a daily oral dose of 2400 to 3600 mg of pregabalin. Discussion: The possible impact of bupropion on subjects with a history of polysubstance dependence is discussed; physicians should be careful when prescribing bupropion in these cases. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER:

American Society of Addiction Medicine; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Bupropion

\*Drug Dependency \*Intravenous Drug Usage

\*Polydrug Abuse Antidepressant Drugs

Drug Abuse Pregabalin

**Source:** PsycINFO

25. Associations between problematic Internet use and adolescents' physical and psychological symptoms: Possible role of sleep quality.

**Citation:** Journal of Addiction Medicine, July 2014, vol./is. 8/4(282-287), 1932-0620;1935-3227

(Jul-Aug 2014)

Author(s): An, Jing; Sun, Ying; Wan, Yuhui; Chen, Jing; Wang, Xi; Tao, Fangbiao

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University, Hefei, China

Language: English

**Abstract:** Objective: To evaluate the associations between problematic Internet use (PIU) and

physical and psychological symptoms among Chinese adolescents, and to investigate the possible role of sleep quality in this association. Methods: A cross-sectional school-based study was conducted in 4 cities in China. The Multidimensional Sub-health Questionnaire of Adolescents, the Pittsburgh Sleep Quality Index, and demographic variables were used

to measure adolescents' physical and psychological symptoms and sleep quality, respectively, in 13,723 students (aged 12-20 years). Problematic Internet use was assessed by the 20-item Young Internet Addiction Test. Logistic regressions were used to evaluate the effects of sleep quality and PIU on physical and psychological symptoms, and to identify the mediating effect of sleep quality in adolescents. Results: Prevalence rates of PIU, physical symptoms, psychological symptoms, and poor sleep quality were 11.7%, 24.9%, 19.8%, and 26.7%, respectively. Poor sleep quality was found to be an independent risk factor for both physical and psychological symptoms. The effects of PIU on the 2 health outcomes were partially mediated by sleep quality. Conclusions: Problematic Internet use is becoming a significant public health issue among Chinese adolescents that requires urgent attention. Excessive Internet use may not only have direct adverse health consequences but also have indirect negative effects through sleep deprivation. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER:

American Society of Addiction Medicine; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Internet Addiction

\*Sleep \*Symptoms

**Source:** PsycINFO

26. Powder and crack cocaine use among opioid users: Is all cocaine the same?

**Citation:** Journal of Addiction Medicine, July 2014, vol./is. 8/4(264-270), 1932-0620;1935-3227

(Jul-Aug 2014)

**Author(s):** Stewart, Melissa J; Fulton, Heather G; Barrett, Sean P

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Language: English

**Abstract:** Objectives: Problematic cocaine use is highly prevalent and is a significant public health

concern. However, few investigations have distinguished between the 2 formulations of cocaine (ie, powder and crack cocaine) when examining the characteristics of cocaine use. Moreover, research has yet to assess the patterns of powder and crack cocaine use among opioid users, a clinical population in which problematic cocaine use is increasingly common. Using a within-subjects design, this study examined whether opioid users reported different patterns and features of powder and crack cocaine use. along with distinct trajectories and consequences of use. Methods: Seventy-three clients enrolled in a low-threshold methadone maintenance treatment were interviewed regarding their lifetime use of powder and crack cocaine. Results: Compared with crack cocaine, initiation and peak use of powder cocaine occurred at a significantly younger age. In relation to recent cocaine use, participants were significantly more likely to report using crack cocaine than using powder cocaine. Differences in routes of administration, polysubstance use, and criminal activity associated with cocaine use were also found between the 2 forms of cocaine. Conclusions: Results suggest that it may not be appropriate to consider powder and crack cocaine as diagnostically and clinically equivalent. As such, researchers may wish to distinguish explicitly between powder and crack cocaine when assessing the characteristics and patterns of cocaine use among substance users and treat these 2 forms of cocaine separately in analyses. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER:

American Society of Addiction Medicine; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Cocaine

\*Crack Cocaine
\*Drug Abuse
\*Opiates

Source: PsycINFO

27. A review of guidelines on home drug testing Web sites for parents.

Citation: Journal of Addiction Medicine, July 2014, vol./is. 8/4(258-263), 1932-0620;1935-3227

(Jul-Aug 2014)

Author(s): Washio, Yukiko; Fairfax-Columbo, Jaymes; Ball, Emily; Cassey, Heather; Arria, Amelia

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US

Language: English

**Abstract:** Objectives: To update and extend prior work reviewing Web sites that discuss home drug

testing for parents, and assess the quality of information that the Web sites provide, to assist them in deciding when and how to use home drug testing. Methods: We conducted a worldwide Web search that identified 8 Web sites providing information for parents on home drug testing. We assessed the information on the sites using a checklist developed with field experts in adolescent substance abuse and psychosocial interventions that focus on urine testing. Results: None of the Web sites covered all the items on the 24-item checklist, and only 3 covered at least half of the items (12, 14, and 21 items, respectively).

The remaining 5 Web sites covered less than half of the checklist items. The mean

number of items covered by the Web sites was 11. Conclusions: Among the Web sites that we reviewed, few provided thorough information to parents regarding empirically supported strategies to effectively use drug testing to intervene on adolescent substance use. Furthermore, most Web sites did not provide thorough information regarding the risks and benefits to inform parents' decision to use home drug testing. Empirical evidence regarding efficacy, benefits, risks, and limitations of home drug testing is

needed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: American Society of Addiction Medicine; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Drug Usage Screening \*Home Environment

\*Parents
\*Websites

Source: PsycINFO

28. Review of Re/entry: A guide for nurses dealing with substance use disorder.

**Citation:** Alcohol and Alcoholism, September 2014, vol./is. 49/5(600), 0735-0414;1464-3502

(Sep-Oct 2014)

Author(s): Doolan, Jim

**Institution:** Lanark, United Kingdom

Language: English

**Abstract:** Reviews the book, Re/Entry: A Guide for Nurses Dealing with Substance Use Disorder

by Karolyn Crowley and Carrie Morgan (2013). This book is written for nursing staff who have or had a substance use disorder (SUD) and who wish to return to/continue their chosen profession. The book is about recovery, re-establishing a career blighted by substance abuse or dependence. The authors write in a way that it is easily assimilated and understood; also shows considerable empathy towards the nurse in early recovery. The book makes reference to redirection. There is useful information and tentative guidelines for managers who are faced with employees with substance use disorder. The book is recommended this to all nursing staff and managers. (PsycINFO Database Record

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**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: \*Drug Abuse

\*Drug Dependency

\*Nurses

\*Recovery (Disorders)

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

# 29. Managing alcohol problems in general practice in Europe: Results from the European ODHIN survey of general practitioners.

**Citation:** Alcohol and Alcoholism, September 2014, vol./is. 49/5(531-539), 0735-0414;1464-3502

(Sep-Oct 2014)

Author(s): Anderson, Peter; Wojnar, Marcin; Jakubczyk, Andrzej; Gual, Antoni; Segura, Lidia;

Sovinova, Hana; Csemy, Ladislav; Kaner, Eileen; Newbury-Birch, Dorothy; Fornasin, Alessio; Struzzo, Pierluigi; Ronda, Gaby; van Steenkiste, Ben; Keurhorst, Myrna; Laurant, Miranda; Ribeiro, Cristina; do Rosario, Frederico; Alves, Isabel; Scafato,

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on Addictive Behaviours and Dependencies, Lisbon, Portugal; General-Diretorate for

Ljubljana, Slovenia

Language: English

**Abstract:** Aims: To document the attitudes of general practitioners (GPs) from eight European

countries to alcohol and alcohol problems and how these attitudes are associated with self-reported activity in managing patients with alcohol and alcohol problems. Methods:

A total of 2345 GPs were surveyed. The questionnaire included questions on the GP's demographics, reported education and training on alcohol, attitudes towards managing alcohol problems and self-reported estimates of numbers of patients managed for alcohol and alcohol problems during the previous year. Results: The estimated mean number of patients managed for alcohol and alcohol problems during the previous year ranged from 5 to 21 across the eight countries. GPs who reported higher levels of education for alcohol problems and GPs who felt more secure in managing patients with such problems reported managing a higher number of patients. GPs who reported that doctors tended to have a disease model of alcohol problems and those who felt that drinking was a personal rather than a medical responsibility reported managing a lower number of patients. Conclusion: The extent of alcohol education and GPs' attitudes towards alcohol were associated with the reported number of patients managed. Thus, it is worth exploring the extent to which improved education, using pharmacotherapy in primary health care and a shift to personalized health care in which individual patients are facilitated to undertake their own assessment and management (individual responsibility) might increase the number of heavy drinkers who receive feedback on their drinking and support to reduce their drinking. (PsycINFO Database Record (c) 2014 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

\*Alcohols

\*Drug Therapy

\*General Practitioners Health Care Services

**Physicians** 

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

30. Translating the Semi-Structured Assessment for Drug Dependence and Alcoholism in the Western Pacific: Rationale, study design and reliability of alcohol dependence.

**Citation:** Alcohol and Alcoholism, September 2014, vol./is. 49/5(525-530), 0735-0414;1464-3502

(Sep-Oct 2014)

Author(s): Quinn, Amity E; Rosen, Rochelle K; McGeary, John E; Amoa, Francine; Kranzler, Henry

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RI, US

Language: English

**Abstract:** Aims: The aims of this study were to develop a bilingual version of the Semi-Structured

Assessment for Drug Dependence and Alcoholism (SSADDA) in English and Samoan and determine the reliability of assessments of alcohol dependence in American Samoa. Methods: The study consisted of development and reliability-testing phases. In the development phase, the SSADDA alcohol module was translated and the translation was evaluated through cognitive interviews. In the reliability-testing phase, the bilingual SSADDA was administered to 40 ethnic Samoans, including a sub-sample of 26

individuals who were retested. Results: Cognitive interviews indicated the initial translation was culturally and linguistically appropriate except items pertaining to alcohol tolerance, which were modified to reflect Samoan concepts. SSADDA reliability testing indicated diagnoses of DSM-III-R and DSM-IV alcohol dependence were reliable. Reliability varied by language of administration. Conclusion: The English/Samoan version of the SSADDA is appropriate for the diagnosis of DSM-III-R alcohol dependence, which may be useful in advancing research and public health efforts to address alcohol problems in American Samoa and the Western Pacific. The translation methods may inform researchers translating diagnostic and assessment tools into different languages and cultures. (PsycINFO Database Record (c) 2014 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

\*Bilingualism

\*Cognitive Processes

Interviews Tolerance

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

31. The moderating effect of stimulus attractiveness on the effect of alcohol consumption on attractiveness ratings.

**Citation:** Alcohol and Alcoholism, September 2014, vol./is. 49/5(515-519), 0735-0414;1464-3502

(Sep-Oct 2014)

Author(s): Chen, Xiong; Wang, Xiaoyu; Yang, Dong; Chen, Youguo

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Southwest University, Chongqing, China

Language: English

**Abstract:** Aims: To explore the enhancing effect of alcohol consumption on attractiveness ratings,

in that few studies on the Beer Goggles effect control the stimuli attractiveness level and researchers have seldom considered extending the effect to stimuli other than faces. Methods: Male and female participants (n = 103) were randomly assigned to alcohol consumption or placebo groups. Both groups were asked to assess the attractiveness of two types of pictures (faces and landscapes) with three levels of attractiveness for each stimulus category (high, moderate and low). Results: We found significant interactions between beverage type and attractiveness level. Attractiveness ratings for moderate- and low-attractiveness faces were significantly higher in the alcohol compared with placebo condition, while there was no significant difference for high-attractiveness stimuli between these two conditions. As for landscapes, only low-attractiveness stimuli were rated significantly higher in the alcohol condition. Conclusion: Whether or not alcohol consumption leads to an increase in attractiveness ratings depends on the initial

attractiveness of the stimulus materials. Alcohol consumption tends to affect ratings for stimuli with relatively low attractiveness. Furthermore, this effect is not limited to faces; it extends to other types of stimuli like landscapes. (PsycINFO Database Record (c) 2014

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Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights

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**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Physical Attractiveness \*Pictorial Stimuli

Placebo

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

32. A pharmaco-EEG-based assessment of the interaction between ethanol and zonisamide.

**Citation:** Alcohol and Alcoholism, September 2014, vol./is. 49/5(505-514), 0735-0414;1464-3502

(Sep-Oct 2014)

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Language: English

**Abstract:** Aims: Recent research suggests a potential role for a new generation of anticonvulsant

drugs, including zonisamide, in the treatment of alcohol dependence. Some elements of the central mechanism of action that zonisamide has in common with ethanol, give rise to the question of whether there is an interaction between these two agents and whether there is any risk associated with the enhanced depressive effect of these agents on the central nervous system. Methods: This study uses a pharmaco-EEG method to examine the interaction of ethanol with zonisamide. The influence of zonisamide on the effect of ethanol on EEG of rabbits (midbrain reticular formation, hippocampus, frontal cortex) was determined. Zonisamide was administered p.o. as a single dose (20 or 60 mg/kg) or repeatedly at a dose of 30 mg/kg/day for 14 days. Ethanol was injected i.v. at a dose of 0.8 g/kg 180 min after the administration of zonisamide. Results: Ethanol caused an increase in the low frequencies (0.5-4 Hz) in the recording, as well as a marked decrease in the higher frequencies (13-30 and 30-45 Hz). Changes in the EEG recordings after zonisamide alone were more significant compared with these after repeated doses. In the hippocampus after single dose of drug the proportion of the low frequency (0.5-4 Hz) increased, whereas the proportion of high frequencies decreased. Combined

administration of ethanol and zonisamide (60 mg/kg) resulted in a markedly synergistic effect in the examined structures. A beneficial effect of repeatedly administered zonisamide on ethanol-induced EEG changes was observed, especially in the

hippocampus. Conclusion: Zonisamide in repeated doses decreases the sensitivity of the hippocampus to ethanol, an observation that may be important in the treatment of alcohol addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights

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**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Anticonvulsive Drugs

\*Electroencephalography

\*Rabbits Alcoholism Ethanol

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

33. BDNF SNPs are implicated in comorbid alcohol dependence in schizophrenia but not in alcohol-dependent patients without schizophrenia.

**Citation:** Alcohol and Alcoholism, September 2014, vol./is. 49/5(491-497), 0735-0414;1464-3502

(Sep-Oct 2014)

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Technology, Kelvin Grove, QLD, Australia; Institute of Health and Biomedical Innovation, Queensland University of Technology, Kelvin Grove, QLD, Australia

Language: English

**Abstract:** Aims: The functional BDNF single nucleotide polymorphism (SNP) rs6265 has been

associated with many disorders including schizophrenia and alcohol dependence. However, studies have been inconsistent, reporting both positive and negative

associations. Comorbid alcohol dependence has a high prevalence in schizophrenia so we investigated the role of rs6265 in alcohol dependence in Australian populations of schizophrenia and alcohol-dependent patients. Methods: Two BDNF SNPs rs6265 and a nearby SNP rs7103411 were genotyped in a total of 848 individuals. These included a

nearby SNP rs7103411 were genotyped in a total of 848 individuals. These included a schizophrenia group (n = 157) and a second schizophrenia replication group (n = 235), an alcohol-dependent group (n = 231) that had no schizophrenia diagnosis and a group of healthy controls (n = 225). Results: Allelic association between rs7103411 and comorbid alcohol dependence was identified (P = 0.044) in the primary schizophrenia sample. In the replication study, we were able to detect allelic associations between both BDNF SNPs and comorbid alcohol dependence (rs6265, P = 0.006; rs7103411, P = 0.014). Moreover, we detected association between both SNPs and risk-taking behaviour after drinking (rs6265, P = 0.005; rs7103411, P = 0.009) and we detected strong association between both SNPs and alcohol dependence in males (rs6265, P = 0.009; rs7103411, P = 0.013) while females showed association with multiple behavioural measures reflecting repetitive alcohol consumption. Haplotype analysis revealed the rs6265-rs7103411 A/C haplotype is associated with comorbid alcohol dependence (P = 0.002). When these SNPs

were tested in the non-schizophrenia alcohol-dependent group we were unable to detect association. Conclusion: We conclude that these BDNF SNPs play a role in development of comorbid alcohol dependence in schizophrenia while our data do not indicate that they play a role in alcohol-dependent patients who do not have schizophrenia. (PsycINFO

Database Record (c) 2014 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

\*Comorbidity
\*Polymorphism
\*Schizophrenia

Brain Derived Neurotrophic Factor

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

34. Monitoring of internet forums to evaluate reactions to the introduction of reformulated OxyContin to deter abuse.

Citation: Journal of Medical Internet Research, May 2014, vol./is. 16/5(170-183), 1438-8871 (May

2014)

Author(s): McNaughton, Emily C; Coplan, Paul M; Black, Ryan A; Weber, Sarah E; Chilcoat,

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Inc., Newton, MA, US

Language: English

**Abstract:** Background: Reformulating opioid analgesics to deter abuse is one approach toward

improving their benefit-risk balance. To assess sentiment and attempts to defeat these products among difficult-to-reach populations of prescription drug abusers, evaluation of posts on Internet forums regarding reformulated products may be useful. A reformulated version of OxyContin (extended-release oxycodone) with physicochemical properties to deter abuse presented an opportunity to evaluate posts about the reformulation in online discussions. Objective: The objective of this study was to use messages on Internet forums to evaluate reactions to the introduction of reformulated OxyContin and to identify methods aimed to defeat the abuse-deterrent properties of the product. Methods: Posts collected from 7 forums between January 1, 2008 and September 30, 2013 were evaluated before and after the introduction of reformulated OxyContin on August 9, 2010. A quantitative evaluation of discussion levels across the study period and a qualitative coding of post content for OxyContin and 2 comparators for the 26 month period before and after OxyContin reformulation were conducted. Product endorsement was estimated for each product before and after reformulation as the ratio of endorsing-to-discouraging posts (ERo). Post-to-preintroduction period changes in ERos (ie, ratio of ERos) for each product were also calculated. Additionally, post content related to recipes for defeating reformulated OxyContin were evaluated from August 9, 2010 through September 2013. Results: Over the study period, 45,936 posts related to OxyContin, 18,685 to Vicodin (hydrocodone), and 23,863 to Dilaudid (hydromorphone) were identified. The proportion of OxyContin-related posts fluctuated between 6.35 and 8.25 posts per 1000 posts before the reformulation, increased to 10.76 in Q3 2010 when reformulated OxyContin was introduced, and decreased from 9.14 in Q4 2010 to 3.46 in Q3 2013 in the period following the reformulation. The sentiment profile for OxyContin changed following reformulation; the post-to-preintroduction change in the ERo indicated reformulated OxyContin was discouraged significantly more than the original formulation (ratio of ERos = 0.43, P < .001). A total of 37 recipes for circumventing the abuse-deterrent characteristics of reformulated OxyContin were observed; 32 were deemed feasible (ie, able to abuse). The frequency of posts reporting abuse of reformulated OxyContin via these recipes was low and decreased over time. Among the 5677 posts mentioning reformulated OxyContin, 825 posts discussed recipes and 498 reported abuse of reformulated OxyContin by such recipes (41 reported injecting and 128 reported snorting). Conclusions: After introduction of physicochemical properties to deter abuse, changes in discussion of OxyContin on forums occurred reflected by a reduction in discussion levels and endorsing content. Despite discussion of recipes, there is a relatively small proportion of reported abuse of reformulated OxyContin via recipes, particularly by injecting or snorting routes. Analysis of Internet discussion is a valuable tool for monitoring the impact of abuse-deterrent formulations. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** 

STATEMENT: Originally published in the Journal of Medical Internet Research (http://www.jmir.org), 02.05.2014. This is an open-access article distributed under the terms of the Creative Commons Attribution License

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copyright and license information must be included.; HOLDER: Emily C McNaughton, Paul M Coplan, Ryan A Black, Sarah E Weber, Howard D Chilcoat, Stephen F Butler

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Analgesic Drugs

\*Drug Abuse \*Opiates \*Risk Factors Internet

Source: PsycINFO

Full Text: Available from National Library of Medicine in Journal of Medical Internet Research

35. Review of Ashamed no more: A pastor's journey through sex addiction.

Citation: Journal of Psychology and Christianity, 2014, vol./is. 33/2(194-195), 0733-4273 (Sum,

2014)

**Author(s):** Bassett, Rodney L

Correspondence Address: Bassett, Rodney L.: Roberts Wesleyan College, 2301 Westside Dr., Rochester, NY, US,

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**Institution:** Roberts Wesleyan College, Rochester, NY, US

Language: English

**Abstract:** Reviews the book, Ashamed No More: A Pastor's Journey through Sex Addiction by T. C.

Ryan (see record 2012-24510-000). The book presents a story about redemption and sexual addiction that avoids salacious details while giving an honest and helpful account of what it means for the Holy Spirit to work in the life of a fallen, but loved, believer. The author makes a convincing case for the notion that there really is such a thing as sexual addiction. In addition, one gets a clear look at the arduousness and the ebb and flow of recovery work. There is an aura of grace about this book because the author has a clear sense of the grace extended to him. The book doesn't quite read like a novel, but it comes close: the kind of "novel" that encourages one to live better, love deeper, and bask in the

love of God. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Christian Association for Psychological Studies; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Christianity

\*God Concepts
\*Ministers (Religion)
\*Recovery (Disorders)
\*Sexual Addiction
Life Experiences

Shame

Source: PsycINFO

**Full Text:** Available from *ProQuest* in *Journal of Psychology and Christianity*; Note: ; Collection

notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop

down list of institutions.

36. Bonding and Internet addiction in adolescent boys and girls in Hong Kong.

Citation: International Journal of Child and Adolescent Health, July 2014, vol./is. 7/3(219-228),

1939-5930 (Jul-Sep 2014)

Author(s): Shek, Daniel T. L; Wong, Tracy; Law, Moon Y. M

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**Institution:** Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong;

Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong; Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong

Language: English

**Abstract:** This study examined the role of gender and bonding in Internet addiction in Hong Kong

junior secondary school students. A total of 3,328 Secondary 1 (Grade 7) students responded to validated measures of positive youth development and Internet addiction. Consistent with the predictions, results showed gender differences in bonding, with adolescent girls showing a higher level of perceived bonding than did adolescent boys; adolescent boys also showed a higher level of Internet addiction symptoms than did girls. The findings provided support for the literature of the prediction of the positive youth development that bonding was related to risk behavior indexed by Internet addiction. The theoretical and practical implications of the findings are discussed. (PsycINFO Database

Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Nova Science Publishers, Inc.

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Adolescent Development

\*Internet Addiction

\*Sex Roles

\*Risk Assessment Human Sex Differences

**Source:** PsycINFO

37. Use of synthetic cannabinoids in patients with psychotic disorders: Case series.

Citation: Journal of Dual Diagnosis, July 2014, vol./is. 10/3(168-173), 1550-4263;1550-4271 (Jul

2014)

Author(s): Celofiga, Andreja; Koprivsek, Jure; Klavz, Janez

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**Institution:** Department of Psychiatry, University Clinical Center Maribor, Maribor, Slovenia;

Department of Psychiatry, University Clinical Center Maribor, Maribor, Slovenia; Department for Laboratory Diagnostics, University Clinical Center Maribor, Maribor,

Slovenia

Language: English

**Abstract:** An increasing number of synthetic cannabinoids have become available on the black

market in recent years, and health professionals have seen a corresponding increase in use of these compounds among patients with psychiatric disorders. Unfortunately, there is almost no research available in the literature on this topic, and what little exists is based on case reports of individuals without psychiatric disorders. Synthetic cannabinoids are functionally similar to, but structurally different from, delta-9-tetrahydrocannabinol, the active principle in cannabis, and are problematic for many reasons. The psychotropic action of synthetic cannabinoids in patients with schizophrenia is unpredictable, with very

diverse clinical presentations. These drugs can be much more potent than

delta-9-tetrahydrocannabinol, they are readily available and difficult to detect. The gold standard for identification of synthetic cannabinoids is gas chromatography with mass spectrometry, but even this is difficult because new formulations of these designer drugs are constantly emerging. In this manuscript, we provide an overview and discussion of synthetic cannabinoids and present four cases of patients with synthetic cannabinoid intoxication who were hospitalized in our intensive psychiatric unit at the time of intoxication. All patients had a history of schizophrenia and had been hospitalized several times previously. While hospitalized, they smoked an unknown substance brought in by a

visitor, which was then confirmed using gas chromatography with mass spectrometry to be the synthetic cannabinoid AM-2201. Our patients experienced predominantly psychiatric adverse clinical effects. We observed the appearance of new psychotic

phenomena, without exacerbation of their previously known psychotic symptoms, as well as the occurrence or marked worsening of mood and anxiety symptoms. Despite several similar reactions, and even though they ingested the same exact substance, the clinical picture differed markedly between individual patients. We assume that the acute effects of synthetic cannabinoids in patients with schizophrenia would be different from those in persons without psychotic disorders. The reasons for this difference could be the actual symptomatology of the presenting disorder, the impact of psychopharmacotherapy, individual patient differences and probably many, as yet unknown, factors. The long-term consequences of synthetic cannabinoid use on preexisting psychotic disorders are unclear. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: International Congress on Dual Disorders, 3rd, Oct, 2013, Barcelona, Spain, Parts of this

paper were presented as a poster at the aforementioned conference.

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

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Cannabinoids

\*Drug Abuse \*Mental Disorders Paranoid Schizophrenia Side Effects (Drug)

**Source:** PsycINFO

38. Substance use and social anxiety in transsexual individuals.

Citation: Journal of Dual Diagnosis, July 2014, vol./is. 10/3(162-167), 1550-4263;1550-4271 (Jul

2014)

Author(s): Guzman-Parra, Jose; Paulino-Matos, Pedro; de Diego-Otero, Yolanda; Perez-Costillas,

Lucia; Villena-Jimena, Amelia; Garcia-Encinas, Maria A; Bergero-Miguel, Trinidad

Correspondence Address: Guzman-Parra, Jose: Mental Health Research Unit, Plaza Hospital Civil S/N, Planta 1,

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**Institution:** Mental Health Department, University General Hospital of Malaga, Malaga, Spain;

Mental Health Department, University General Hospital of Malaga, Malaga, Spain; Mental Health Department, University General Hospital of Malaga, Malaga, Spain; Mental Health Department, University General Hospital of Malaga, Malaga, Spain; Mental Health Department, University General Hospital of Malaga, Malaga, Spain; Mental Health Department, University General Hospital of Malaga, Malaga, Spain; Mental Health Department, University General Hospital of Malaga, Malaga, Spain

Language: English

**Abstract:** Objective: This study examined social anxiety and use of cannabis and cocaine among

transsexuals. Methods: A total of 379 transsexuals seeking treatment or consultation participated in this study, providing data on sociodemographics, substance use, and anxiety. Analyses were based on (a) lifetime but not current use versus never used and (b) current use only versus no current use (lifetime only or never used). Results: Lifetime only cannabis users (n = 72, 19%) and lifetime only cocaine users (n = 36, 9.8%) were older, had more victimization, and received more mental health treatment that those who never used. Current cannabis users (n = 47, 12.4%) had higher scores on fear of negative evaluation and social avoidance than those not currently using (p <.01). Multivariate analysis showed that social avoidance and fear of negative evaluation were associated with current cannabis use (p <.05), but not cocaine. Further, being single was associated with current cannabis use, after controlling for social avoidance and fear of negative evaluation (p <.05). Conclusions: Transsexuals' levels of anxiety and cannabis/cocaine use are comparable to those in the general population. Cannabis may be used to control anxiety and can have detrimental clinical implications for transsexuals. (PsycINFO

Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Social Anxiety
\*Transsexualism
\*Treatment
Cocaine
Transgender

Source: PsycINFO

39. Dual diagnosis among physicians: A clinical perspective.

Citation: Journal of Dual Diagnosis, July 2014, vol./is. 10/3(148-155), 1550-4263;1550-4271 (Jul

2014)

Author(s): Braquehais, Maria Dolores; Lusilla, Pilar; Bel, Miquel Jordi; Navarro, Maria Cecilia;

Nasillo, Viviana; Diaz, Albert; Valero, Sergi; Padros, Jaume; Bruguera, Eugeni; Casas,

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Oficial de Metges de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain; Department of Psychiatry and Legal Medicine, Hospital Universitari Vall d'Hebron, CIBERSAM, Universitat Autonoma de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain; Integral Care Program for Sick Doctors, Galatea Clinic, Galatea C

Galatea Foundation, Collegi Oficial de Metges de Barcelona, Barcelona, Spain

Language: English

**Abstract:** Co-occurrence of mental disorders and substance use disorders (dual diagnosis) among

consequences. This work provides an overview of the prevalence of dual diagnosis among physicians, suggests a clinical etiological model to explain the development of dual diagnosis in doctors, and recommends some treatment strategies specifically for doctors. The most common presentation of dual diagnosis among doctors is the combination of alcohol use disorders and affective disorders. There are also high rates of self-medication with benzodiazepines, legal opiates, and amphetamines compared to the general population, and cannabis use disorders are increasing, mainly in young doctors. The prevalence of nicotine dependence varies from one country to another depending on the nature of public health policies. Emergency medicine physicians, psychiatrists, and anaesthesiologists are at higher risk for developing a substance use disorder compared with other doctors, perhaps because of their knowledge of and access to certain legal drugs. Two main pathways may lead doctors toward dual diagnosis: (a) the use of substances (often alcohol or self-prescribed drugs) as an unhealthy strategy to cope with their emotional or mental distress and (b) the use of substances for recreational or other purposes. In both cases, doctors tend to delay seeking help once a problem has been established, often for many years. Denial, minimization, and rationalization are common defense mechanisms, maybe because of the social stigma associated with mental or substance use disorders, the risk of losing employment/medical license, and a professional culture of perfectionism and denial of emotional needs or failures. Personal vulnerability

doctors is a cause of serious concern due to its negative personal, professional, and social

interacts with these factors to increase the risk of a dual diagnosis developing in some individuals. When doctors with substance use disorders accept treatment in programs specifically designed for them (Physicians' Health Programs), they show better outcomes than the general population. However, physicians with dual diagnosis have more psychological distress and worse clinical prognosis than those with substance use disorders only. Future studies should contribute to a better comprehension of the risk and protective factors and the evidence-based treatment strategies for doctors with dual diagnosis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: International Congress of Dual Pathology. 3rd. Oct, 2013. Barcelona. Spain. The content

of this manuscriptwas partially presented at the aforementioned conference.

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

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Mental Disorders
\*Physicians
\*Risk Factors
Dual Diagnosis

Source: PsycINFO

40. Dual diagnosis discourse in Victoria Australia: The responsiveness of mental health services.

**Citation:** Journal of Dual Diagnosis, July 2014, vol./is. 10/3(139-144), 1550-4263;1550-4271 (Jul

2014)

Author(s): Roberts, Bridget M; Maybery, Darryl

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**Institution:** Monash University, Department of Rural and Indigenous Health, VIC, Australia; Monash

University, Department of Rural and Indigenous Health, School of Rural Health, VIC,

Australia

Language: English

**Abstract:** Objective: In recent decades, psychiatric services have been challenged to be more

responsive to patients' coexisting problems, in particular those concerning substance use. In Australia this has been referred to as a "No Wrong Door" approach. This paper

explores the meanings of this move for the acute mental health sector, including attitudes toward a No Wrong Door approach to people with a dual diagnosis of mental illness and substance use disorder. Methods: This qualitative study involved a review of the research literatures, analysis of policy documents, and interviews with 19 key informants in a case study of the State of Victoria, Australia. Results: The analysis resulted in two broad themes surrounding the implications of dual diagnosis discourse for the mental health

sector. The first involves progress regarding the concept of No Wrong Door with subthemes including interprofessional cultural conflicts, intersectoral professional status issues, terminology, problem definition, perspectives on serious mental illness, the role of the client, and pharmacological treatment. The second overarching theme focuses upon informants' thoughts on future directions for the sector and highlights divided opinion on the implications of dual diagnosis discourse for the mental health service and social care systems. Conclusions: While the perspectives on system change and multiple issues such as resource concerns and cultural clashes are presented here, the informants in this study also gave clear guidance for the future of dual diagnosis work in the mental health sector (e.g., focusing on orienting services toward consumer strengths and recovery), along with recommendations for future research. This paper contributes to the small body of

qualitative research on the history and course of efforts to develop appropriate practice in mental health services with regard to patients who have substance use problems and other mental health disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

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

Journal: Peer Reviewed Journal **Publication Type:** 

**Subject Headings:** \*Dual Diagnosis

\*Mental Health Services

\*Responsibility Drug Abuse **Mental Disorders** 

Source: **PsvcINFO** 

41. Barriers to implementation of treatment guidelines for ADHD in adults with substance use disorder.

Journal of Dual Diagnosis, July 2014, vol./is, 10/3(130-138), 1550-4263;1550-4271 (Jul Citation:

2014)

Author(s): Matthys, Frieda; Soyez, Veerle; van den Brink, Wim; Joostens, Peter; Tremmery, Sabine;

Sabbe, Bernard

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**Institution:** Department of Psychiatry, Vrije Universiteit Brussel (VUB), University Hospital,

> Brussels and MSOC Free Clinic, Antwerp, Belgium; Faculty of Psychology, Vrije Universiteit Brussel (VUB), Brussels, Belgium; Amsterdam Institute for Addiction Research, Amsterdam, Department of Psychiatry, Academic Medical Center, University of Amsterdam, Amsterdam, Netherlands; Psychiatric Centre Broeders Alexianen, Tienen, Belgium; Department Child&Adolescent Psychiatry, University Hospitals Leuven, KU Leuven, Leuven, Belgium; Collaborative Antwerp Psychiatric Research Institute (CAPRI), University of Antwerp, Vrije Universiteit Brussel (VUB), Duffel, Belgium

Language: English

Abstract: Objective: Attention deficit hyperactivity disorder (ADHD) is common among adult

> patients with a substance use disorder, yet often goes undetected. This is a qualitative study to explore implementation barriers to a guideline developed in Belgium for the recognition and treatment of ADHD in adult patients with substance use disorder and to gain a better understanding of the strategies to overcome these barriers. Methods: Focus groups were conducted with caregivers and patients to explore experiences with comorbid substance use disorder and ADHD. The barriers reported in these focus groups became the subject of further study in focus groups with addiction professionals (physicians, psychiatrists, and psychologists) who had tried the guideline and with psychiatrists specializing in addiction but without experience with ADHD. Results: Our analysis revealed a number of barriers to the implementation of this guideline, including lack of information from the family, pressure from patients and caregivers to make an ADHD diagnosis, and the potential for abuse of ADHD medication. Furthermore, diagnostic instruments for ADHD have not been validated in people with substance use disorder. Although patients with ADHD are usually treated in an outpatient setting, patients with ADHD comorbid with substance use disorder are difficult to identify in an outpatient setting for various reasons. Finally, there is a lack of specific ADHD expertise in substance use treatment organizations. Conclusions: Despite the availability of an approved guideline for recognizing and treating adult ADHD in patients with a substance

use disorder, underdiagnosis and inadequate treatment still persist. As in general substance use treatment, medication only plays a supportive role in the treatment of substance use disorder with comorbid ADHD. An integrated approach and further improvements in the competence of practitioners may help to reduce the resistance to diagnosing ADHD in substance use treatment centers. Practitioners who specialize in addiction medicine and therapists without medical education view the problem from different perspectives and therefore each group needs specific information and training. Targeted interventions need to be developed to keep these patients in treatment.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Conference Information:** World Psychiatric Association International Congress. Oct, 2013. Vienna. Austria. The

study was presented at the aforementioned conference.

**Country of Publication:** HOLDER: Taylor & Francis Group, LLC **Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Attention Deficit Disorder with Hyperactivity

\*Drug Abuse

\*Treatment Guidelines \*Treatment Barriers

Source: PsycINFO

42. Contingency management for patients with dual disorders in intensive outpatient treatment for addiction.

Citation: Journal of Dual Diagnosis, July 2014, vol./is. 10/3(108-117), 1550-4263;1550-4271 (Jul

2014)

**Author(s):** Kelly, Thomas M; Daley, Dennis C; Douaihy, Antoine B

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**Institution:** Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, PA,

US; Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh School of Medicine,

Pittsburgh, PA, US

Language: English

**Abstract:** Objective: This quality improvement program evaluation investigated the effectiveness of

contingency management for improving retention in treatment and positive outcomes among patients with dual disorders in intensive outpatient treatment for addiction. Methods: The effect of contingency management was explored among a group of 160 patients exposed to contingency management (n = 88) and not exposed to contingency management (no contingency management, n = 72) in a six-week partial hospitalization program. Patients referred to the partial hospitalization program for treatment of

substance use and comorbid psychiatric disorders received diagnoses from psychiatrists and specialist clinicians according to the Diagnostic and Statistical Manual of the American Psychiatric Association. A unique application of the contingency management "fishbowl" method was used to improve the consistency of attendance at treatment sessions, which patients attended 5 days a week. Days attending treatment and drug-free days were the main outcome variables. Other outcomes of interest were depression,

anxiety and psychological stress, coping ability, and intensity of drug cravings. Results: Patients in the contingency management group attended more treatment days compared to patients in the no contingency management group; M = 16.2 days (SD = 10.0) versus M = 9.9 days (SD = 8.5), respectively; t = 4.2, df = 158, p < .001. No difference was found between the treatment groups on number of drug-free days. Psychological stress and drug craving were inversely associated with drug-free days in bivariate testing (r = -.18, p < .02; r = -.31, p < .001, respectively). Treatment days attended and drug craving were associated with drug-free days in multivariate testing (B = .05, E = .01, B = .47; E = .12, E = .30, E = .39, E = .39, E = .39, E = .39, E = .39. Days

attending treatment partially mediated the relationship between exposure to contingency management and self-reported drug-free days. Conclusions: Contingency management is a valuable adjunct for increasing retention in treatment among patients with dual disorders in partial hospitalization treatment. Exposure to contingency management

increases retention in treatment, which in turn contributes to increased drug-free days. Interventions for coping with psychological stress and drug cravings should be emphasized in intensive dual diagnosis group therapy. (PsycINFO Database Record (c)

2014 APA, all rights reserved) (journal abstract)

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

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Addiction

\*Contingency Management

\*Disorders

\*Outpatient Treatment

Retention

**Source:** PsycINFO

43. Professional confidence and job satisfaction: An examination of counselors' perceptions in faith-based and non-faith-based drug treatment programs.

Citation: International Journal of Offender Therapy and Comparative Criminology, August 2014,

vol./is. 58/8(975-992), 0306-624X;1552-6933 (Aug 2014)

Author(s): Chu, Doris C; Sung, Hung-En

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University, Box 2003, State University, AR, US, 72467, dchu@astate.edu

**Institution:** Arkansas State University, Jonesboro, AR, US; John Jay College of Criminal Justice,

New York, NY, US

Language: English

**Abstract:** Understanding substance abuse counselors' professional confidence and job satisfaction is

important since such confidence and satisfaction can affect the way counselors go about their jobs. Analyzing data derived from a random sample of 110 counselors from faith-based and non-faith-based treatment programs, this study examines counselors' professional confidence and job satisfaction in both faith-based and non-faith-based programs. The multivariate analyses indicate years of experience and being a certified counselor were the only significant predictors of professional confidence. There was no significant difference in perceived job satisfaction and confidence between counselors in faith-based and non-faith-based programs. A majority of counselors in both groups expressed a high level of satisfaction with their job. Job experience in drug counseling and prior experience as an abuser were perceived by counselors as important components to facilitate counseling skills. Policy implications are discussed. (PsycINFO Database

Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Counselor Attitudes

\*Drug Rehabilitation \*Job Satisfaction \*Self Confidence

\*Faith Counselors Drug Abuse

Source: PsycINFO

### 44. Why do some jail inmates not engage in treatment and services?

Citation: International Journal of Offender Therapy and Comparative Criminology, August 2014,

vol./is. 58/8(914-930), 0306-624X;1552-6933 (Aug 2014)

**Author(s):** Meyer, Candace L; Tangney, June P; Stuewig, Jeffrey; Moore, Kelly E

Correspondence Address: Tangney, June P.: Department of Psychology, George Mason University, 4400 University

Dr, Fairfax, VA, US, 22030, jtangney@gmu.edu

**Institution:** Private Practice, Herndon, VA, US; George Mason University, Fairfax, VA, US; George

Mason University, Fairfax, VA, US; George Mason University, Fairfax, VA, US

Language: English

**Abstract:** Jail inmates represent a high-risk, multineed population. Why do some jail inmates not

access available programs and services? Drawn from a longitudinal study, 261 adults were assessed shortly upon incarceration and reassessed prior to transfer or release from a county jail. Of the participants in need of treatment, 18.5% did not participate in any formal treatment programs or religious programs and services. Untreated inmates were disproportionately young and male and less likely to report preincarceration cocaine dependence. Treatment participation varied little as a function of race or symptoms of

mental illness. The most common reason for nonparticipation was the belief that one would not be around long enough to participate in programs. Other reasons were both institution-related and person-related in nature, including doubts about treatment efficacy, stigma concerns, lack of motivation, and lack of programs, especially addressing mental illness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Client Participation

\*Drug Abuse

\*Help Seeking Behavior \*Mental Disorders

\*Prisoners Prisons

**Treatment Effectiveness Evaluation** 

Treatment

**Source:** PsycINFO

45. The influence of attributional style on substance use and risky sexual behavior among college students.

**Citation:** College Student Journal, 2014, vol./is. 48/2(325-336), 0146-3934 (Sum, 2014)

**Author(s):** Burnett, Audrey J; Sabato, Todd M; Wagner, Laurie; Smith, Amy

**Institution:** James Madison University, Harrisonburg, VA, US; James Madison University,

Harrisonburg, VA, US; Kent State University, OH, US; Virginia Tech, VA, US

Language: English

**Abstract:** HIV, AIDS, STIs, and unwanted pregnancy continue to impact young adults in the U.S. at

a disproportionate rate, particularly during the college years. Attributional style (i.e., locus of control) influences one's HIV risk. Internal locus of control indicates a lower risk of HIV infection, whereas external locus of control signals an increased risk of becoming infected with HIV. A sample of 1,874 university students aged 16-54 years were surveyed to determine if sexually active males versus females with external, unstable, and specific causal attribution (i.e., external locus of control) engaged in safer sexual practices (e.g., condom use) and lesser alcohol and legal illicit drug use. Results indicated that male students with an external attributional style engaged in a greater number of unsafe sexual behaviors (e.g., multiple partners) and higher amounts of alcohol and drug use than female students. Additionally, for both males and females, an internal attributional style was associated with greater drug use and a greater likelihood to engage in HIV-related risk behavior. Comprehensive sexual health and substance use education targeting college students should consider attributional style in relation to health promoting and protective behaviors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Attribution

\*College Students
\*Drug Usage
\*Sexual Risk Taking

HIV

**Sexually Transmitted Diseases** 

**Source:** PsycINFO

**Full Text:** Available from *ProQuest* in *College Student Journal*; Note: ; Collection notes: If asked to

log in click "Athens Login" and then select "NHSEngland" in the drop down list of

institutions.

46. Treatments for drug users in mental health institutions: Perspectives based on the psychoanalytic clinic.

Original Title: Os tratamentos para usuarios de drogas em instituicoes de saude mental: Perspectivas a

partir da clinica psicanalitica.

**Citation:** Revista Latinoamericana de Psicopatologia Fundamental, June 2013, vol./is.

16/2(260-272), 1415-4714 (Jun 2013)

Author(s): Ribeiro, Cynara Teixeira; Fernandes, Andrea Hortelio

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Brazil, 59064-390, cynara\_ribeiro@yahoo.com.br

**Institution:** Universidade Federal da Bahia (UFBA), Salvador, Brazil; Universidade Federal da Bahia

(UFBA), Salvador, Brazil

Language: Portuguese

**Abstract:** This paper presents an analysis of treatments provided to drug users from a

psychoanalytic perspective. Specific aspects of the clinical direction of the treatment of addictions are discussed, with a special focus on the concepts of subject, jouissance and

ethics, brought up through fragments of clinical cases. We conclude that the

psychoanalytic clinic does contribute to such treatments by opening up possibilities for a repositioning of the subject and new ways to configure jouissance. (PsycINFO Database

Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This is an open-access article, which permits unrestricted use, distribution,

and reproduction in any medium, provided the original author and source are credited.; HOLDER: University Association for Research in Fundamental Psychopathology;

YEAR: 2009

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Usage

\*Psychoanalytic Theory

\*Treatment Clinics

Mental Health

Source: PsycINFO

**Full Text:** Available from *ProQuest* in *Revista Latinoamericana de Psicopatologia Fundamental*;

Note: ; Collection notes: If asked to log in click "Athens Login" and then select

"NHSEngland" in the drop down list of institutions.

47. Randomized controlled evaluation of the Too Good for Drugs prevention program: Impact on adolescents at different risk levels for drug use.

Citation: Journal of Drug Education, 2013, vol./is. 43/3(277-300), 0047-2379;1541-4159 (2013)

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**Institution:** University of South Florida, Tampa, FL, US; University of South Florida, Tampa, FL, US

Language: English

**Abstract:** Sixth graders participating in the Too Good for Drugs (TGFD) prevention program in

comparison to 6th graders not participating show different results by student risk level. Sixth graders from 20 middle schools were randomly assigned to receive the intervention and those from 20 paired middle schools assigned to serve as controls (N = 10,762). Participants were identified as low, moderate, or high risk for drug usage based on their rates of behaviors reported prior to the start of the study. Student behavior outcomes (smoking, alcohol consumption, binge drinking, and marijuana usage) as well as risk and protective (R&P) outcomes were surveyed at three points in time (before, after, and 6 months following treatment). Results show the TGFD to have a suppressive effect on reported drug use behavior and a strengthening effect on R&P outcomes among high risk students following treatment and 6 months later. Some effects were also found for low

and moderate risk students. A favorable treatment effect was found on mathematics achievement. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** HOLDER: Baywood Publishing Co., Inc.; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Usage

\*Evaluation
\*Middle Schools
\*Prevention
\*Risk Factors

Adolescent Development

**Source:** PsycINFO

48. The impact of science education games on prescription drug abuse attitudes among teens: A case study.

**Citation:** Journal of Drug Education, 2013, vol./is. 43/3(255-275), 0047-2379;1541-4159 (2013)

**Author(s):** Klisch, Yvonne; Bowling, Kristi G; Miller, Leslie M; Ramos, Miguel A

Correspondence Address: Klisch, Yvonne: Rice University, Center for Technology in Teaching and Learning, 6100

Main Street, MS 120, Houston, TX, US, 77005, yklisch@gmail.com

**Institution:** Rice University, Center for Technology in Teaching and Learning, Houston, TX, US; Rice

University, Center for Technology in Teaching and Learning, Houston, TX, US; Rice University, Center for Technology in Teaching and Learning, Houston, TX, US;

University of Houston, Houston, TX, US

Language: English

**Abstract:** Two online science education games, in which players learn about the risks of

prescription drug abuse in the context of investigating crimes, were evaluated to determine shifts of prescription drug abuse attitudes attributable to game exposure. High school students from grades 11 and 12 (n = 179) were assigned to one of the games and participated in a pretest, two game-play sessions, and a delayed posttest. Students in both groups demonstrated more negative attitudes toward prescription drug abuse after playing the game, driven by changes of students' normative beliefs and their ability to make the connection between prescription drug abuse and illicit drugs. A secondary aim was to assess gains in science knowledge; however, due to low internal consistency reliabilities

of content measures, students' knowledge acquisition could not be determined. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Baywood Publishing Co., Inc.; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Games

\*Prescription Drugs \*Science Education

Attitudes Drug Abuse

**High School Students** 

**High Schools** 

Source: PsycINFO

49. "Hot" cognition and dual systems: Introduction, criticisms, and ways forward.

Citation: Neuroeconomics, judgment, and decision making., 2015(157-180) (2015)

**Author(s):** Gladwin, Thomas E; Figner, Bernd

**Institution:** Radboud University, Nijmegen, Netherlands; Radboud University, Nijmegen, Netherlands

Language: English

**Abstract:** (from the chapter) Models distinguishing two types of processes or systems-typically one

more automatic and/or affective-motivational, one more controlled and/or calculating-deliberative-are widespread in psychological science. However, such dual-process (or dual-system) models suffer from various problems and have been substantially criticized recently. In this chapter, we discuss these types of models, attempt to clarify terminology, discuss recent critiques at both empirical and theoretical levels, and suggest a more mechanistic explanation grounded in physiology and reinforcement learning of what makes "hot" processes hot. We discuss success stories and challenges related to these types of models in two illustrative fields, addiction and adolescent risk taking. Finally, we outline the basic ideas behind our R3 model-a reprocessing model, grounded in reinforcement learning that conceptualizes levels of reflectivity as emergent

states of one single system, rather than a separate process or system-as a possible way

forward to address and overcome problems of dual-process models. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** \*Cognition

\*Cognitive Processes \*Dual Process Models

Learning
Physiology
Reinforcement

**Source:** PsycINFO

#### 50. Brain reward and stress systems in addiction.

**Citation:** Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 9, 2014)

**Author(s):** Gilpin, Nicholas W

Correspondence Address: Gilpin, Nicholas W., nwgilpin@gmail.com

**Institution:** Department of Physiology, Louisiana State University Health Sciences Center New

Orleans, New Orleans, LA, US

Language: English

**Abstract:** This editorial discusses brain reward and stress systems in addiction. Addiction to drugs

and alcohol is a dynamic and multi-faceted disease process in humans, with devastating health and financial consequences for the individual and society at large. The main purpose of this Research Topic is to consolidate review and empirical articles by leaders in the addiction field that collectively explore the contribution of brain reward and stress systems in addiction. The articles in this Research Topic address various points of current

emphasis in the addiction research field. One such area is the idea of individual differences. Also addressed in this set of articles is the notion that individual

neurochemical systems may be critical for mediating not only abuse of more than one drug, but for mediating co-abuse of more than one drug in a single individual. Another area of major social concern that is currently receiving much attention in the addiction research field is the drive to understand the long-term effects of adolescent drug and alcohol exposure on brain and behavior. Collectively, the articles provide a snapshot of the current theoretical and experimental landscape in the addiction research field.

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these terms.; HOLDER: Gilpin; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Brain

\*Drug Addiction

\*Rewards

\*Scientific Communication

\*Stress

**Animal Models** 

Source: PsycINFO

#### 51. Cannabis use and dependence among French schizophrenic inpatients.

**Citation:** Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 15, 2014)

Author(s): Lejoyeux, Michel; Basquin, Anne; Koch, Marie; Embouazza, Houcine; Chalvin,

Florence; Ilongo, Michaelle

Correspondence Address: Lejoyeux, Michel: Department of Psychiatry and Addictive Medicine, Maison Blanche

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France, 75018, Cedex 18, michel.lejoyeux@bch.aphp.fr

**Institution:** Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital,

Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France

Language: English

**Abstract:** Background: To assess the prevalence of cannabis use and dependence in a population of

schizophrenic inpatients and to compare schizophrenics with and without cannabis consumption. Methods: One hundred one schizophrenic patients were examined during their first week of hospitalization. They answered the PANNS scale of schizophrenia, the CAGE and the Fagerstrom questionnaire, and the DSM-IV-TR criteria for cannabis, alcohol, opiates, and nicotine use dependence were checked. We also assessed socio-demographic characteristics, the motive of cannabis consumption, and the number of cannabis joints and alcoholic drinks taken. Results: The prevalence of cannabis consumption was 33.6% among schizophrenic inpatients. Schizophrenics consuming cannabis were younger than non-schizophrenics (33.3 vs. 44.7 years p < 0.0001), more often male (77 vs. 54%, p = 0.02) and had been hospitalized for the first time in psychiatry earlier (24.3 vs. 31.3 p = 0.003). Eighty-eight percent of cannabis consumers were dependent on cannabis. They were more often dependent on opiates (17 vs. 0%) and

27%, p = 0.04). Logistic regression revealed that factors associated to cannabis consumption among schizophrenics were cannabis dependence, male gender, pathological gambling, opiate dependence, number of joints smoked each day, and compulsive buying. Conclusion: 33.6% of the schizophrenic patients hospitalized in psychiatry consume cannabis and most of them are dependent on cannabis and alcohol. Hospitalization in psychiatry may provide an opportunity to systematically identify a dependence disorder and to offer appropriate information and treatment. (PsycINFO Database Record (c) 2014

alcohol (32 vs. 7.4%, p = 0.001) and presented compulsive buying more often (48 vs.

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Chalvin and Ilongo; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Cannabis

\*Drug Dependency
\*Drug Usage

\*Hospitalized Patients \*Schizophrenia Epidemiology

**Source:** PsycINFO

#### 52. Cognitive impairments in alcohol-dependent subjects.

**Citation:** Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 16, 2014)

**Author(s):** Bernardin, Florent; Maheut-Bosser, Anne; Paille, François

Correspondence Address: Paille, François: Service d'Addictologie, CHU Nancy, Hopitaux de Brabois, Vandoeuvre,

France, F-54550, secretariat.pr.paille@chu-nancy.fr

**Institution:** Service d'Addictologie, CHU Nancy, Vandoeuvre, France; Service d'Addictologie, CHU

Nancy, Vandoeuvre, France; Service d'Addictologie, CHU Nancy, Vandoeuvre, France

Language: English

**Abstract:** Chronic excessive alcohol consumption induces cognitive impairments mainly affecting

executive functions, episodic memory, and visuospatial capacities related to multiple brain lesions. These cognitive impairments not only determine everyday management of these patients, but also impact on the efficacy of management and may compromise the abstinence prognosis. Maintenance of lasting abstinence is associated with cognitive recovery in these patients, but some impairments may persist and interfere with the good conduct and the efficacy of management. It therefore appears essential to clearly define neuropsychological management designed to identify and evaluate the type and severity of alcohol-related cognitive impairments. It is also essential to develop cognitive

remediation therapy so that the patient can fully benefit from the management proposed in addiction medicine units. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

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these terms.; HOLDER: Bernardin, Maheut-Bosser and Paille; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Cognitive Impairment

Brain Damage

Cognitive Rehabilitation Episodic Memory Visuospatial Ability Executive Function

Source: PsycINFO

## 53. Stress modulates illness-course of substance use disorders: A translational review.

**Citation:** Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 17, 2014)

**Author(s):** Lijffijt, Marijn; Hu, Kesong; Swann, Alan C

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Medicine, Houston, TX, US; Human Neuroscience Institute, Department of Human Development, Cornell University, Ithaca, NY, US; Menninger Department of Psychiatry

and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US

Language: English

**Abstract:** Childhood trauma and post-childhood chronic/repeated stress could increase the risk of a

substance use disorder by affecting five stages of addiction illness-course: (a) initial experimentation with substances; (b) shifting from experimental to regular use; (c) escalation from regular use to abuse or dependence; (d) motivation to quit; and (e) risk of (re-)lapse. We reviewed the human literature on relationships between stress and addiction illness-course. We explored per illness-course stage: (i) whether childhood trauma and post-childhood chronic/repeated stress have comparable effects and (ii) whether effects cut across classes of substances of abuse. We further discuss potential underlying mechanisms by which stressors may affect illness-course stages for which we relied on evidence from studies in animals and humans. Stress and substances of abuse both activate stress and dopaminergic motivation systems, and childhood trauma and post-childhood stressful events are more chronic and occur more frequently in people who use substances. Stressors increase risk to initiate early use potentially by affecting

accelerate transition to regular use potentially due to prior effects of stress on sensitization of dopaminergic motivation systems, cross-sensitizing with substances of abuse, especially in people with high trait impulsivity who are more prone to sensitization. Finally, stressors increase risk for abuse and dependence, attenuate motivation to quit, and increase relapse risk potentially by intensified sensitization of motivational systems, by a shift from positive to negative reinforcement due to sensitization of the amygdala by

trait-like factors of risk-taking, decision making, and behavioral control. Stressors also

corticotropin releasing factor, and by increased sensitization of noradrenergic systems. Stress generally affects addiction illness-course across stressor types and across classes of substances of abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

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these terms.; HOLDER: Lijffijt, Hu and Swann; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Addiction

\*Drug Abuse \*Trauma Stress

**Source:** PsycINFO

54. Genetics of opioid dependence: A review of the genetic contribution to opioid dependence.

**Citation:** Current Psychiatry Reviews, 2014, vol./is. 10/2(156-167), 1573-4005 (2014)

Author(s): Mistry, Chetna J; Bawor, Monica; Desai, Dipika; Marsh, David C; Samaan, Zainab

Correspondence Address: Samaan, Zainab: McMaster University, Hamilton, ON, Canada, samaanz@mcmaster.ca

**Institution:** Arts & Science Undergraduate Program, McMaster University, Hamilton, ON, Canada;

McMaster Integrative Neuroscience Discovery & Study (MiNDS), McMaster University, Hamilton, ON, Canada; Population Health Research Institute, Hamilton, ON, Canada; Northern Ontario School of Medicine, Sudbury, ON, Canada; Population Health Research

Institute, Hamilton, ON, Canada

Language: English

**Abstract:** This narrative review aims to provide an overview of the impact of opioid dependence

and the contribution of genetics to opioid dependence. Epidemiological data demonstrate

that opioid dependence is a global trend with far-reaching effects on the social, economic, and health care systems. A review of classical genetic studies of opioid use suggests significant heritability of drug use behavior, however the evidence from molecular genetic studies is inconclusive. Nonetheless, certain genetic variants are important to consider given their role in the pathophysiology of addictive behavior. We undertook a literature review to identify the current state of knowledge regarding the role of genes in opioid dependence. Determining the association of genetic markers could change the current understanding of the various factors contributing to opioid dependence and therefore may improve recognition of individuals at risk for the disorder and prevention and treatment strategies. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Bentham Science Publishers; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Dependency

\*Genetics
\*Narratives
\*Opiates
Heritability

**Source:** PsycINFO

55. Genetics: A window into the biology of the mind.

Citation: Current Psychiatry Reviews, 2014, vol./is. 10/2(89-90), 1573-4005 (2014)

Author(s): Bawor, Monica; Dennis, Brittany B; Samaan, Zainab

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**Institution:** MiNDS Neuroscience Graduate Program, McMaster University, Hamilton, ON, Canada;

Health Research Methodology Graduate Program, McMaster University, Hamilton, ON, Canada; Department of Clinical Epidemiology and Biostatistics, McMaster University,

Hamilton, ON, Canada

Language: English

**Abstract:** This editorial provides an overview of the present issue of Current Psychiatry Reviews.

This issue presents an insight into the current literature available on the role of genetics in

psychiatry through a series of reviews. Collectively, the genetic determinants of psychiatric disorders including schizophrenia, attention deficit hyperactivity disorder

(ADHD), autism, and addiction are explored and topics including

psychopharmacogenetics, mitochondrial genetics, and the genetics of childhood

behavioral disorders are reviewed. This issue also presents a novel approach to the study of genetic determinants of psychiatric illness that involves the mitochondrial genome instead of nuclear DNA. It is anticipated this comprehensive series can encourage readers to take a deeper look into the biological underpinnings of the brain, which harbors the mechanisms of thoughts, actions, and behavior seen in psychiatric illness. (PsycINFO

Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Genetics

\*Mental Disorders

\*Psychiatry

\*Scientific Communication

**Source:** PsycINFO

56. Synaptic changes induced by melanocortin signalling.

Citation: Nature Reviews Neuroscience, February 2014, vol./is. 15/2(98-110), 1471-003X (Feb

2014)

Author(s): Caruso, Vanni; Lagerstrom, Malin C; Olszewski, Pawel K; Fredriksson, Robert; Schioth,

Helgi B

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Pharmacology, Uppsala University, Uppsala, Sweden

Language: English

**Abstract:** The melanocortin system has a well-established role in the regulation of energy

homeostasis, but there is growing evidence of its involvement in memory, nociception, mood disorders and addiction. In this Review, we focus on the role of the melanocortin 4 receptor and provide an integrative view of the molecular mechanisms that lead to melanocortin-induced changes in synaptic plasticity within these diverse physiological systems. We also highlight the importance of melanocortin peptides and receptors in chronic pain syndromes, memory impairments, depression and drug abuse, and the possibility of targeting them for therapeutic purposes. (PsycINFO Database Record (c)

2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR:

2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Neural Receptors

\*Peptides

\*Synaptic Plasticity Affective Disorders Homeostasis

Memory Pain

Cell Signaling

Source: PsycINFO

Full Text: Available from Nature Publishing Group NHS Pilot 2014 (NESLi2) in Nature Reviews

Neuroscience; Note: ; Collection notes: Academic-License

#### 57. Pregnenolone limits effects of cannabis.

Citation: Nature Reviews Neuroscience, February 2014, vol./is. 15/2(66), 1471-003X (Feb 2014)

**Author(s):** Welberg, Leonie

Language: English

**Abstract:** Comments on an article by M. Vallee et al. (see record 2014-00873-002). In their paper,

Vallee and colleagues investigated whether they also have a role in addiction. They found that a subcutaneous injection of THC greatly increased pregnenolone levels in the nucleus accumbens - among other brain areas - in rats and mice for at least 2 hours. Their findings

suggest that pregnenolone is itself a neuroactive steroid and not merely a steroid precursor. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR:

2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Cannabinoids

\*Hormones
\*Steroids
Brain

Cannabis

Neural Receptors Toxic Disorders

Source: PsycINFO

Full Text: Available from Nature Publishing Group NHS Pilot 2014 (NESLi2) in Nature Reviews

Neuroscience; Note: ; Collection notes: Academic-License

58. Characteristics of a national sample of victims of intimate partner violence (IPV): Associations between perpetrator substance use and physical IPV.

Citation: Nordic Studies on Alcohol and Drugs, June 2014, vol./is. 31/3(261-270), 1458-6126 (Jun

2014)

Author(s): Lund, Ingunn Olea

Correspondence Address: Lund, Ingunn Olea, iol@sirus.no

**Institution:** Norwegian Institute for Alcohol and Drug Research (SIRUS), Norway

Language: English

**Abstract:** Background: This paper provides a characterisation of a national sample of intimate

partner violence (IPV) victim shelter residents. The study also examines whether perpetrator substance use contributed to physical IPV in 2 subsamples: 1) Norwegian victims and perpetrators, and 2) immigrant victims and perpetrators. Methods: A national sample (N = 1363) of women at IPV shelters in Norway in 2011. Results: The majority (62.2%) of the women had immigrant background, and social security was the most common employment/income status (42.6%). A combination of psychological and physical IPV was most frequently reported (56.1%). Perpetrator substance use was common in the Norwegian sample (57.5%). while many in the immigrant sample (47.1%) were unsure about perpetrator substance use. Perpetrator substance use was associated with physical IPV in both subsamples. Conclusions: Immigrant IPV victims are overrepresented in the shelter population, as are women on social security. While substance use is associated with physical IPV among Norwegians and immigrants, the

association is more obvious in the Norwegian sample. The high rates of immigrant women stating they are unsure about perpetrator substance use underscore the importance that future studies address this question in a culturally sensitive matter. (PsycINFO

Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Crime Victims

\*Drug Usage

\*Intimate Partner Violence

\*Perpetrators Shelters

**Source:** PsycINFO

**Full Text:** Available from *ProQuest* in *Nordic Studies on Alcohol and Drugs*; Note: ; Collection

notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop

down list of institutions.

59. Childhood trauma and suicide risk in a sample of young individuals aged 14-35 years in southern Brazil.

Citation: Child Abuse & Neglect, July 2014, vol./is. 38/7(1191-1196), 0145-2134 (Jul 2014)

**Author(s):** Barbosa, Luana Porto; Quevedo, Luciana; da Silva, Giovanna Del Grande; Jansen, Karen;

Pinheiro, Ricardo Tavares; Branco, Jeronimo; Lara, Diogo; Oses, Jean; da Silva, Ricardo

Azevedo

Correspondence Address: Barbosa, Luana Porto: Universidade Catolica de Pelotas (Catholic University of Pelotas),

Felix da Cunha, 412, Centro, Pelotas, Brazil, CEP: 96010-000

**Institution:** Programa de Pos-Graduação em Saude e Comportamento, Universidade Catolica de

Pelotas, Pelotas, Brazil; Programa de Pos-Graduacao em Saude e Comportamento, Universidade Catolica de Pelotas, Pelotas, Brazil; Programa de Pos-Graduacao em Saude e Comportamento, Universidade Catolica de Pelotas, Pelotas, Brazil; Programa de Pos-Graduacao em Saude e Comportamento, Universidade Catolica de Pelotas, Pelotas, Brazil; Programa de Pos-Graduacao em Saude e Comportamento, Universidade Catolica de Pelotas, Pelotas, Brazil; Programa de Pos-Graduacao em Saude e Comportamento, Universidade Catolica de Pelotas, Pelotas, Brazil; Pontificia Universidade Catolica do Rio Grande do Sul (PUC-RS), Porto Alegre, Brazil; Programa de Pos-Graduacao em Saude e Comportamento, Universidade Catolica de Pelotas, Pelotas, Brazil; Programa de Pos-Graduacao em Saude e Comportamento, Universidade Catolica de Pelotas, Pelotas, Brazil

Language: English

**Abstract:** Suicide is among the main causes of death of people aged between 15 and 44 years old.

Childhood trauma is an important risk factor for suicide. Hence, the objective of this study was to verify the relationship between childhood trauma and current suicide risk (suicidal behavior and ideation) in individuals aged 14-35 years, in the city of Pelotas, Brazil. This is a cross-sectional, population-based study. Sample selection was performed by clusters. Suicide risk was evaluated using the Mini International Neuropsychiatric Interview (MINI) and Childhood trauma was assessed with the Childhood Trauma Questionnaire (CTQ). Moreover, the participants responded to a questionnaire concerning socioeconomic status, work, and substance use. The sample was composed of 1,380 individuals. The prevalence of suicide risk was 11.5%. The prevalence figures of childhood trauma were 15.2% (emotional neglect), 13.5% (physical neglect), 7.6% (sexual abuse), 10.1% (physical abuse), and 13.8% (emotional abuse). Suicide risk was associated (p < .001) with gender, work, alcohol abuse, tobacco use, and all types of childhood trauma. The odds of suicide risk were higher in women (OR =1.8), people who were not currently working (OR =2.3), individuals who presented alcohol abuse (OR =2.6), and among tobacco smokers (OR =3.4). Moreover, suicide risk was increased in all types of trauma: emotional neglect (OR =3.7), physical neglect (OR =2.8), sexual abuse (OR = 3.4), physical abuse (OR = 3.1), and emotional abuse (OR = 6.6). Thus, preventing early trauma may reduce suicide risk in young individuals. (PsycINFO Database Record

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

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Usage

\*Suicide \*Trauma Risk Factors

Socioeconomic Status

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Child Abuse and Neglect* 

60. Prefrontal gray matter and motivation for treatment in cocaine-dependent individuals with and without personality disorders.

**Citation:** Frontiers in Psychiatry, May 2014, vol./is. 5/, 1664-0640 (May 20, 2014)

Author(s): Moreno-Lopez, Laura; Albein-Urios, Natalia; Martinez-Gonzalez, Jose Miguel;

Soriano-Mas, Carles; Verdejo-Garcia, Antonio

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**Institution:** Department of Personality, Evaluation and Psychological Treatment, University of

Granada, Granada, Spain; Department of Personality, Evaluation and Psychological Treatment, University of Granada, Granada, Spain; Red de Trastornos Adictivos, University of Granada, Granada, Spain; Department of Psychiatry, Bellvitge University Hospital, IDIBELL, Barcelona, Spain; Department of Personality, Evaluation and

Psychological Treatment, University of Granada, Granada, Spain

Language: English

Abstract:

Addiction treatment is a long-term goal and therefore prefrontal-striatal regions regulating goal-directed behavior are to be associated with individual differences on treatment motivation. We aimed at examining the association between gray matter volumes in prefrontal cortices and striatum and readiness to change at treatment onset in cocaine users with and without personality disorders. Participants included 17 cocaine users without psychiatric comorbidities, 17 cocaine users with Cluster B disorders, and 12 cocaine users with Cluster C disorders. They completed the University of Rhode Island Change Assessment Scale, which measures four stages of treatment change (precontemplation, contemplation, action, and maintenance) and overall readiness to change, and were scanned in a 3T MRI scanner. We defined three regions of interest (ROIs): the ventromedial prefrontal cortex (including medial orbitofrontal cortex and subgenual and rostral anterior cingulate cortex), the dorsomedial prefrontal cortex (i.e., superior medial frontal cortex), and the neostriatum (caudate and putamen). We found that readiness to change correlated with different aspects of ventromedial prefrontal gray matter as a function of diagnosis. In cocaine users with Cluster C comorbidities, readiness to change positively correlated with gyrus rectus gray matter, whereas in cocaine users without comorbidities it negatively correlated with rostral anterior cingulate cortex gray matter. Moreover, maintenance scores positively correlated with dorsomedial prefrontal gray matter in cocaine users with Cluster C comorbidities, but negatively correlated with this region in cocaine users with Cluster B and cocaine users without comorbidities. Maintenance scores also negatively correlated with dorsal striatum gray matter in cocaine users with Cluster C comorbidities. We conclude that the link between prefrontal-striatal gray matter and treatment motivation is modulated by co-existence of personality

**Country of Publication:** 

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disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Cocaine

\*Motivation

abstract)

\*Personality Disorders

\*Treatment
\*Gray Matter
Cingulate Cortex

**Source:** PsycINFO

61. Impulsive and reflective processes related to alcohol use in young adolescents.

**Citation:** Frontiers in Psychiatry, May 2014, vol./is. 5/, 1664-0640 (May 22, 2014)

Author(s): Pieters, Sara; Burk, William J; Van der Vorst, Haske; Engels, Rutger C; Wiers, Reinout W

Correspondence Address: Pieters, Sara: Training and Performance Innovations (TNO), Kampweg 5, Soesterberg,

Netherlands, 3769 DE, sarapieters@gmail.com

**Institution:** TNO, Soesterberg, Netherlands; Behavioural Science Institute, Radboud University,

Nijmegen, Netherlands; Behavioural Science Institute, Radboud University, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University, Nijmegen, Netherlands;

Addiction, Development and Psychopathology (ADAPT) Lab, Department of Psychology, University of Amsterdam, Amsterdam, Netherlands

Toyonorogy, on versely of Finisher dam, France

Language: English

**Abstract:** Background: Dual process models suggest that the development of addictive behaviors is

the result of interplay between impulsive and reflective processes, modulated by boundary conditions such as individual or situational factors. Empirical support for this

model has been repeatedly demonstrated in adult samples [for a meta-analysis, see Ref. (1)]. The purpose of this study was to test these processes as they relate to emerging alcohol use in adolescents. Specifically, the interactive effects of several measures of impulsive and reflective processes and working memory capacity (WMC) are examined as predictors of changes in alcohol use among adolescents. It was expected that measures of reflective processes would better predict changes in alcohol use than measures of impulsive processes. Moreover, it was anticipated that WMC would moderate the relation between alcohol-specific impulsive and reflective processes and changes in adolescent alcohol use. Methods: The sample consisted of 427 adolescents (47.7% male) between 12 and 16 years of age (M = 13.96, SD = 0.78) who reported drinking alcohol at least once. Four measures of impulsive processes were included. Attentional bias for alcohol was assessed with a Visual Probe Test; approach bias toward alcohol was assessed with a Stimulus Response Compatibility (SRC) Test; and memory associations with alcohol were assessed with an Implicit Association Test (IAT) and a Word Association Test. Two measures of reflective measures were included: positive and negative expectancies. WMC was measured using a Self-Ordered Pointing Task. Results: Results showed that positive expectancies predicted changes in alcohol use, but this effect was qualified by an interaction with IAT scores. Moreover, SRC scores predicted changes in alcohol use only when negative expectancies were low. Attentional bias and word association scores did not predict changes in alcohol use. The relations between alcohol-specific processes or reflective processes and alcohol use were not moderated by WMC. Conclusion: Although there is empirical evidence for the validity of the model in predicting heavier alcohol use in adolescents, or alcohol abuse and dependence in adults, these observations do not generalize to a sample of normative, early adolescents. More specifically, results indicated that reflective processes are more important predictors of changes in alcohol use than impulsive process during adolescence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** 

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**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Adolescent Development

\*Alcoholism
\*Impulsiveness
\*Reflectiveness
Short Term Memory

Source: PsycINFO

62. The family drug and alcohol court service in London: A new way of doing care proceedings.

Citation: Journal of Social Work Practice, July 2014, vol./is. 28/3(357-370), 0265-0533 (Jul 2014)

**Author(s):** Bambrough, Steve; Shaw, Mike; Kershaw, Sophie

**Correspondence Address:** Bambrough, Steve: Tavistock & Portman NHS Foundation Trust, Monroe, 120 Belsize

Lane, London, United Kingdom, NW3 5BA, sbambrough@tavi-port.nhs.uk

Institution: Tavistock & Portman NHS Foundation Trust, London, United Kingdom; Tavistock &

Portman NHS Foundation Trust, London, United Kingdom; FDAC Team, United

Kingdom

Language: English

**Abstract:** In this article, three professionals from the Tavistock & Portman NHS Foundation Trust,

who have been instrumental in developing the Family Drug and Alcohol Court (FDAC) clinical model, introduce the background to this project. The FDAC model is highly dependent on a collaborative approach from local authorities, Government, the Courts, the NHS and the charitable sector, and we hope to give a flavour of that here. In addition to describing what it is that makes FDAC significantly different from other models of

working, we also want to give a description of what it is like to be a social worker within the multi-disciplinary team. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

Country of Publication: HOLDER: GAPS; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

**Subject Headings:** \*Adjudication

\*Child Welfare \*Social Workers Alcohol Abuse Drug Abuse Family

**Source:** PsycINFO

#### 63. Attachment styles, drug abuse and the severity of intimate partner violence.

Original Title: L'influence de l'attachement et de la consommation de drogues sur la severite de la

violence conjugale.

**Citation:** Revue Quebecoise de Psychologie, 2013, vol./is. 34/3(135-153), 0225-9885 (2013)

**Author(s):** Genest, Andree-Anne; Mathieu, Cynthia

Correspondence Address: Mathieu, Cynthia: Departement des Sciences de la Gestion, Universite du Quebec a

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**Institution:** Universite du Quebec a Trois-Rivieres, Trois-Rivieres, PQ, Canada; Universite du

Quebec a Trois-Rivieres, Trois-Rivieres, PQ, Canada

Language: French

**Abstract:** The goal of the present study is to evaluate the link between attachment styles and the

severity of intimate partner violence perpetrated by men. A total of 80 men registered in a group treatment for intimate partner violence have completed measures of intimate partner violence, attachment style, and alcohol and drug abuse. Multiple regressions indicated that avoidant attachment style is the most significant predictor of intimate partner abuse severity. These results suggest that attachment style should be taken into account in research models as well as clinical intervention for intimate partner violence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Attachment Behavior

\*Drug Abuse

\*Group Psychotherapy
\*Intimate Partner Violence

**Source:** PsycINFO

# 64. Recreational drug use and binge drinking: Stimulant but not cannabis intoxication is associated with excessive alcohol consumption.

Citation: Drug and Alcohol Review, July 2014, vol./is. 33/4(436-445), 0959-5236;1465-3362 (Jul

2014)

Author(s): McKetin, Rebecca; Chalmers, Jenny; Sunderland, Matthew; Bright, David A

Correspondence Address: McKetin, Rebecca: Centre for Research on Ageing, Health and Well-Being, Australian

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**Institution:** Centre for Research on Ageing, Health and Well-Being, Australian National University,

Canberra, ACT, Australia; 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; School of Social Sciences,

University of New South Wales, Sydney, NSW, Australia

Language: **English** 

Abstract: Introduction and Aims: Binge drinking is elevated among recreational drug Abstract:

> users, but it is not clear whether this elevation is related to intoxication with recreational drugs. We examined whether stimulant intoxication and cannabis intoxication were associated with binge drinking among young adults. Design and Methods: An online survey of 18- to 30-year-old Australians who had drunk alcohol in the past year (n = 1994) were quota sampled for: (i) past year ecstasy use (n = 497); (ii) past year cannabis (but not ecstasy) use (n = 688); and (iii) no ecstasy or cannabis use in the past year (alcohol-only group, n = 809). Binge drinking last Saturday night (five or more drinks) was compared for participants who took stimulants (ecstasy, cocaine, amphetamine or methamphetamine) or cannabis last Saturday night. Results: Ecstasy users who were intoxicated with stimulants (n = 91) were more likely to binge drink than ecstasy users who were not (n = 406) (89% vs. 67%), after adjusting for demographics, poly-drug use and intoxication with cannabis and energy drinks (adjusted odds ratio 3.1, P = 0.007). drinking a median of 20 drinks (cf. 10 drinks among other ecstasy users). Cannabis intoxication was not associated with binge drinking among cannabis users (57% vs. 55%) or ecstasy users (73% vs. 71%). Binge drinking was more common in all of these groups than in the alcohol-only group (34%). Discussion and Conclusions: Stimulant intoxication, but not cannabis intoxication, is associated with binge drinking among

young adults, compounding already high rates of binge drinking among people who use these drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Abuse

\*Binge Drinking \*Cannabis

\*Methylenedioxymethamphetamine

Drug Usage

Source: **PsycINFO** 

**Full Text:** Available from Wiley in Drug and Alcohol Review

65. 'Weekend on the town': Discrete sessions of drug use for a sample of young psychostimulant users.

Citation: Drug and Alcohol Review, July 2014, vol./is. 33/4(428-435), 0959-5236;1465-3362 (Jul

2014)

Jenkinson, Rebecca; Jolley, Damien; Dietze, Paul Author(s):

**Correspondence Address:** Jenkinson, Rebecca: Centre for Population Health, Burnet Institute, 85 Commercial Road,

Melbourne, VIC, Australia, 3004, rebeccaj@burnet.edu.au

**Institution:** Centre for Population Health, Burnet Institute, Melbourne, VIC, Australia; School of

Public Health and Preventive Medicine, Monash University, Melbourne, VIC, Australia;

Centre for Population Health, Burnet Institute, Melbourne, VIC, Australia

Language: **English** 

**Abstract:** Abstract: Introduction and Aims: Few epidemiological studies have examined the

behaviours and experiences of young adults during discrete drug-use events. This study was designed to capture a rich, detailed description of discrete occasions or 'sessions' of psychostimulant use. Design and Methods: Participants were 220 young psychostimulant

users living in Melbourne, Australia, recruited through targeted advertising in

entertainment street press, on websites, at events/dance parties and through peer referral between September 2007 and March 2008. The research identified the timing, sequence, frequencies, quantities and modes of alcohol and other drug administration during the participants' most recent session of psychostimulant use and explored the contexts and settings in which drug use took place. Results: Participants were well-educated young

people who used a variety of different drugs. Their most recent session of

psychostimulant use was reported as highly enjoyable and typical of their other sessions

of psychostimulant use. The session lasted a median of 20 h, and in most cases, simultaneous drug use was the norm, and large quantities of alcohol, psychostimulants and other drugs were consumed. Acquisition of illicit drugs commonly occurred through social networks during the course of the session and significant sums of money were reportedly spent. Discussion and Conclusions: Findings point to a range of priorities for future research and public health interventions aimed at young psychostimulant users, focused primarily on reducing the prevalence and consequences of simultaneous and heavy/binge drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Drinking Patterns

\*Drug Usage \*Risk Taking Epidemiology

**Source:** PsycINFO

**Full Text:** Available from *Wilev* in *Drug and Alcohol Review* 

66. Understanding alcohol and other drug use during the event.

**Citation:** Drug and Alcohol Review, July 2014, vol./is. 33/4(335-337), 0959-5236;1465-3362 (Jul

2014)

Author(s): Kuntsche, Emmanuel; Dietze, Paul; Jenkinson, Rebecca

Correspondence Address: Kuntsche, Emmanuel, ekuntsche@addictionsuisse.ch

**Institution:** Addiction Switzerland, Research Institute, Lausanne, Switzerland; Centre for Population

Health, Burnet Institute, Melbourne, VIC, Australia; Centre for Population Health, Burnet

Institute, Melbourne, VIC, Australia

Language: English

**Abstract:** This editorial provides an overview of the studies reported in the special issue of Drug

and Alcohol Review. The studies use a mix of established and new methodologies, to break new ground in our understanding of specific substance use events and contribute to the evidence base that will guide future research and targeted public health interventions. The first group of studies involves in situ face-to-face interviews with participants. The second group of studies used repeated assessments with short recall periods to investigate substance use behaviors over time. The papers included in this issue provide important new insights on determinants of substance use behaviors on different levels and for different substances. This special issue provides important examples of how to collect quantitative data in or close to the event in which substance use is actually happening, demonstrating how characteristics of the moment, the event, the day and the individual contribute to substance use and related behaviors in a given situation. By collecting and analyzing information proximal to the event, the papers of this special issue advance our understanding of what really happens when people use substances and how this links to the production of harm. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Drinking Patterns

\*Drug Usage Intervention Public Health

Source: PsycINFO

**Full Text:** Available from *Wiley* in *Drug and Alcohol Review* 

67. The relation between antisocial and borderline personality symptoms and early maladaptive schemas in a treatment seeking sample of male substance users.

Citation: Clinical Psychology & Psychotherapy, July 2014, vol./is. 21/4(341-351),

1063-3995;1099-0879 (Jul-Aug 2014)

Author(s): Shorey, Ryan C; Anderson, Scott; Stuart, Gregory L

Correspondence Address: Shorey, Ryan C.: University of Tennessee, Knoxville, TN, US, rshorey@utk.edu

**Institution:** University of Tennessee, Knoxville, TN, US; Cornerstone of Recovery, Louisville, TN,

US; University of Tennessee, Knoxville, TN, US

Language: English

**Abstract:** Individuals with substance use disorders are more likely to have antisocial and borderline

personality disorder than non-substance abusers. Recently, research has examined the relations between early maladaptive schemas and personality disorders, as early maladaptive schemas are believed to underlie personality disorders. However, there is a dearth of research on the relations between early maladaptive schemas and personality disorders among individuals seeking treatment for substance abuse. The current study examined the relations among early maladaptive schemas and antisocial and borderline personality within in a sample of men seeking substance abuse treatment (n = 98). Results demonstrated that early maladaptive schema domains were associated with antisocial and borderline personality symptoms. Implications of these findings for substance use treatment and research are discussed. Copyright 2013 John Wiley & Sons, Ltd. Key Practitioner Message Antisocial (ASPD) and Borderline (BPD) personality disorder

symptoms are prevalence among individuals seeking substance abuse treatment. Early maladaptive schemas are believed to underlie the development of ASPD and BPD symptoms, and are also prevalence among individuals seeking substance use treatment. Findings from the current study suggest that specific early maladaptive schema domains predict ASPD and BPD symptoms in a substance abuse treatment seeking sample of adult males. The treatment of ASPD and BPD among men seeking substance use treatment may want to focus on early maladaptive schemas. (PsycINFO Database Record (c) 2014

APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: John Wiley & Sons, Ltd.; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Antisocial Behavior

\*Borderline Personality Disorder

\*Drug Abuse \*Personality \*Treatment Schema Symptoms

Source: PsycINFO

**Full Text:** Available from *Wiley* in *Clinical Psychology and Psychotherapy* 

68. Internet addiction: Opportunities for assessment and treatment by psychiatric-mental health nurses.

Citation: Journal of Psychosocial Nursing and Mental Health Services, July 2014, vol./is.

52/7(3-5), 0279-3695 (Jul 2014)

Author(s): Wieland, Diane M

**Institution:** La Salle University, Philadelphia, PA, US

Language: English

**Abstract:** This article discusses Internet addiction and the opportunities for assessment and

treatment by psychiatric-mental health nurses. Computers and the Internet are essential to contemporary living. Computers, tablets, and smart phones can access the Internet, which

is a useful tool for garnering information and sending and receiving e-mail

communications. However, at times, technology interferes with social communication and interpersonal relationships. Opening laptops and using mobile phones during didactic classes is considered uncivil behavior by nursing students and faculty. In addition, the use of mobile phones violates psychiatric hospital and university policies, as well as HIPAA

in clinical settings. However, students still check the time on their mobile phones during psychoeducation groups, take vital signs using a mobile phone, or decide impulsively to take a photograph of hospital grounds using their electronic devices. What can we do about this social phenomena-because technology is not going away. Other disciplines are writing, conducting research, and treating clients with Internet addiction. Where is the nursing science on this topic? Psychiatric-mental health nurses should take the lead in education, prevention, and treatment of Internet disorders- and they should start now. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: SLACK Incorporated

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: \*Internet Addiction

\*Mental Health
\*Psychiatric Nurses

\*Interpersonal Relationships

Cellular Phones

Source: PsycINFO

**Full Text:** Available from *ProOuest* in *Journal of Psychosocial Nursing and Mental Health Services*;

Note: ; Collection notes: If asked to log in click "Athens Login" and then select

"NHSEngland" in the drop down list of institutions.

69. Putting a face on the prescription opioid epidemic: A case report.

Citation: General Hospital Psychiatry, July 2014, vol./is. 36/4(e1-e2), 0163-8343 (Jul 2014)

**Author(s):** Taylor, Jacob L; McKibben, Rebeccah A; DeCamp, Matthew; Chisolm, Margaret S

Correspondence Address: Taylor, Jacob L.: Johns Hopkins Hospital, Department of Psychiatry and Behavioral

Sciences, 600 N. Wolfe Street, Baltimore, MD, US, 21287, jacob.taylor@jhmi.edu

**Institution:** Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of

Medicine, Baltimore, MD, US; Johns Hopkins University, School of Medicine, Baltimore, MD, US; Berman Institute of Bioethics, Johns Hopkins University, Johns Hopkins University School of Medicine, Baltimore, MD, US; Department of Psychiatry and Behavioral Sciences, Johns Hopkins University, School of Medicine, Baltimore, MD,

US

Language: English

**Abstract:** Skilled clinical decision making in the diagnosis and treatment of chronic pain can create

unique clinical and ethical challenges, particularly when opioid medications are involved. This report presents the case of a pregnant woman who sought treatment for an illicit opioid dependence, initiated by opioid analgesic treatment of chronic pain. While recognizing opioids' high level of effectiveness for pain relief, the case demonstrates the potential harms of opioid medications for particular patients. Using a framework informed by medical ethics, the report discusses how clinicians might assess the benefits

informed by medical ethics, the report discusses how clinicians might assess the benefits and risks of opioid treatment by careful data gathering, knowledge of the evidence base and patient-centered, shared decision making. (PsycINFO Database Record (c) 2014

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: \*Drug Abuse

\*Epidemics \*Opiates Chronic Pain Clinical Practice Decision Making

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *General Hospital Psychiatry* 

70. The complex clinical picture of benzodiazepine misuse.

**Citation:** General Hospital Psychiatry, July 2014, vol./is. 36/4(e5-e6), 0163-8343 (Jul 2014)

Author(s): Bharadwaj, Rahul Subramanian

Correspondence Address: Bharadwaj, Rahul Subramanian: Macarthur Mental Health Service, South Western

Sydney Local Health District, University of Western Sydney, Campbelltown Campus,

Campbelltown, NSW, Australia, Rahul.Bharadwaj@sswahs.nsw.gov.au

**Institution:** Macarthur Mental Health Service, South Western Sydney Local Health District,

University of Western Sydney, Campbelltown, NSW, Australia

**Language:** English

**Abstract:** Presents a case report which describes a young man who presented several times to our

hospital over a 6-month period and highlights the complex and risky clinical picture that can result from benzodiazepine misuse. In this case, the presence of numerous symptoms

occurring in atypical patterns made for a confusing clinical picture only further complicated by the patient's frequent lack of cooperation and his persistent denial of benzodiazepine misuse. It is imperative to have a high index of suspicion for substance intoxication and withdrawal, particularly in ED and acute inpatient settings. As highlighted here, although none of the features described in the case are atypical of

benzodiazepine intoxication and major (or complicated) benzodiazepine

withdrawal-"hypomanic" features such as loquacity, mood liability and disinhibition of sexual and aggressive impulses; depressive symptoms such as depressed mood, crying spells, social withdrawal and suicidal thinking; psychotic symptoms; and retrograde and anterograde amnesia-it is the high index of suspicion in a confusing clinical picture that leads to identifying benzodiazepine misuse as the central feature in this case. (PsycINFO

Database Record (c) 2014 APA, all rights reserved)

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

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Benzodiazepines

\*Drug Abuse \*Suicidal Ideation \*Toxic Disorders

**Source:** PsycINFO

Full Text: Available from Elsevier in General Hospital Psychiatry

71. A curriculum to address family medicine residents' skills in treating patients with chronic pain.

**Citation:** International Journal of Psychiatry in Medicine, 2014, vol./is. 47/4(327-336),

0091-2174;1541-3527 (2014)

**Author(s):** Smith, Corey D

Correspondence Address: Smith, Corey D.: Lincoln Family Medicine Program, 4600 Valley Rd., Lincoln, NE, US,

68510, csmith@lmep.com

**Institution:** Lincoln Family Medicine Program, Lincoln, NE, US

**Language:** English

**Abstract:** Chronic pain is a challenging condition, both for the patient, who is coping with constant

pain and limitations in functionality, and for the treating physician. Narcotic medications, often used for the treatment of chronic pain, can be addictive and rates of overdose deaths associated with their use have increased significantly in the last 10 years [1]. Behavioral and physician faculty at the Lincoln Family Medicine Center developed a curriculum to improve family medicine residents' skills in the treatment of patients with chronic pain. The experience includes education in pain physiology and assessment, administration of medications, adjunctive treatments, and interactions with difficult patients. Two cohorts of residents have participated in the curriculum with positive results. The curriculum may be helpful for primary care providers with privileges to prescribe narcotic medications

and is targeted towards resident physicians. (PsycINFO Database Record (c) 2014 APA,

all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Baywood Publishing Co., Inc.; YEAR: 2014

**Publication Type:** Journal: Peer Reviewed Journal

**Subject Headings:** \*Chronic Pain

> \*Curriculum \*Family Medicine \*Medical Residency

\*Physicians

Source: **PsycINFO** 

#### 72. Addiction and temporal bandwidth.

Citation: International Journal of Psychoanalytic Self Psychology, July 2014, vol./is. 9/3(246-262),

1555-1024;1940-9141 (Jul 2014)

Author(s): Goldin, Daniel

Goldin, Daniel, 1515 Hope St., Ste. 202, South Pasadena, CA, US, 91030, **Correspondence Address:** 

danielgoldin@gmail.com

**Institution:** Private Practice, South Pasadena, CA, US

Language: **English** 

**Abstract:** Psychoanalytic thinkers tend to conflate addiction with the use of substances. At any

moment of use, a substance can have emotion-regulating qualities and may even appear to

be a symbolic substitute for a person or a function (a theory at the heart of the self-psychological approach to compulsive substance use). However, addiction-as opposed to use-is a state that happens over time and represents a loss of choice. It is my belief that far from being a symbolic act, addiction is an anti-symbolic state, plucking an individual from a narrative mode of being, which requires a human context and a broad, dynamic sense of time, to a conditioned mode or a somatic feedback mode, which relies largely on positive and negative reinforcement and tends to narrow temporal horizons. A tenet of this article is that a rigidly narrow subjective sense of time, what I call "low temporal bandwidth," is the most prominent feature in a person's vulnerability to addiction, a feature linked to a conditioned mode of being, as opposed to a narrative mode. This article traces some of the early relational pathways to low temporal bandwidth

and explores how a new human context in therapy, centered on the elaboration of emotional states into narratives, can allow for more flexible, dynamic temporal bandwidth that often dramatically loosens the pull of addiction. (PsycINFO Database Record (c)

2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The International Association for Psychoanalytic Self Psychology

Journal; Peer Reviewed Journal **Publication Type:** 

**Subject Headings:** \*Addiction

> \*Feedback \*Psychoanalysis \*Temporal Frequency \*Visual Contrast

**PsycINFO** Source:

73. PTSD risk associated with a functional DRD2 polymorphism in heroin-dependent cases and controls is limited to amphetamine-dependent individuals.

Addiction Biology, July 2014, vol./is. 19/4(700-707), 1355-6215;1369-1600 (Jul 2014) Citation:

Author(s): Nelson, Elliot C; Heath, Andrew C; Lynskey, Michael T; Agrawal, Arpana; Henders,

Anjali K; Bowdler, Lisa M; Todorov, Alexandre A; Madden, Pamela A. F; Moore,

Elizabeth; Degenhardt, Louisa; Martin, Nicholas G; Montgomery, Grant W

**Correspondence Address:** Nelson, Elliot C.: Department of Psychiatry, Washington University School of Medicine,

4560 Clayton Avenue, St. Louis, MO, US, 63110, nelsone@wustl.edu

**Institution:** Department of Psychiatry, Washington University School of Medicine, St. Louis, MO.

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of Psychiatry, Washington University School of Medicine, St. Louis, MO, US; Queensland Institute of Medical Research, Brisbane, QLD, Australia; Queensland Institute of Medical Research, Brisbane, QLD, Australia; Department of Psychiatry, Washington University School of Medicine, St. Louis, MO, US; Department of Psychiatry, Washington University School of Medicine, St. Louis, MO, US; New South Wales Health, Justice Health & Forensic Mental Health Network, Pagewood, NSW, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; Queensland Institute of Medical Research, Brisbane, QLD,

Australia; Oueensland Institute of Medical Research, Brisbane, OLD, Australia

Language: English

**Abstract:** Abstract Posttraumatic stress disorder (PTSD), a pathologic response to severe stress, is a

common co-morbid disorder in substance-dependent individuals. Evidence from twin studies suggests that PTSD is moderately heritable. Genetic association studies to date have reported a limited number of replicated findings. We conducted a candidate gene association study in trauma-exposed individuals within the Comorbidity and Trauma Study's sample (1343 heroin-dependent cases and 406 controls from economically disadvantaged neighborhoods). After data cleaning, the 1430 single nucleotide polymorphisms (SNPs) retained for analyses provided coverage of 72 candidate genes and included additional SNPs for which association was previously reported as well as 30 ancestry-informative markers. We found a functional DRD2 promoter polymorphism (rs12364283) to be most highly associated with PTSD liability [odds ratio (OR) 1.65 (1.27-2.15); P = 1.58 x 10-4]; however, this association was not significant, with a stringent Bonferroni correction for multiple comparisons. The top hits include SNPs from other dopaminergic system genes: DRD2 DRD3, TH and DBH. Additional analyses

revealed that the association involving rs12364283 is largely limited to amphetamine-dependent individuals. Substantial risk is observed in

amphetamine-dependent individuals, with at least one copy of this SNP [OR 2.86 (1.92-4.27);  $P = 2.6 \times 10$ -7]. Further analyses do not support extensive mediation of PTSD risk via self-reported impulsivity (BIS total score). These findings suggest roles for impairment in inhibitory control in the pathophysiology of PTSD and raise questions about stimulant use in certain populations (e.g. those in combat). (PsycINFO Database

Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Amphetamine

\*Drug Addiction \*Heroin Addiction \*Polymorphism

\*Posttraumatic Stress Disorder

Genes Risk Factors

**Source:** PsycINFO

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

74. Relation between corticosterone and fear-related behavior in mice selectively bred for high or low alcohol preference.

**Citation:** Addiction Biology, July 2014, vol./is. 19/4(663-675), 1355-6215;1369-1600 (Jul 2014)

Author(s): Chester, Julia A; Kirchhoff, Aaron M; Barrenha, Gustavo D

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Language: English

**Abstract:** Abstract Blunted cortisol responses to stress or trauma have been linked with genetic

(familial) risk for both alcoholism and post-traumatic stress disorder (PTSD). Mouse lines selectively bred for high (HAP) or low (LAP) alcohol preference may be a relevant model of genetic risk for co-morbid alcoholism and PTSD in humans. HAP mice show greater fear-potentiated startle (FPS), a model used to study PTSD, than LAP mice. The relation between corticosterone (CORT) and FPS behavior was explored in four experiments. Naive male and female HAP2 and LAP2 mice received fear-conditioning or control

treatments, and CORT levels were measured before and immediately after

fear-conditioning or FPS testing. In two other experiments, HAP2 mice received CORT (1.0, 5.0 or 10.0 mg/kg) or a glucocorticoid receptor antagonist (mifepristone; 25.0 and

50.0 mg/kg) 30 minutes before fear conditioning. HAP2 mice exposed to fear conditioning and to control foot shock exposures showed lower CORT after the

fear-conditioning and FPS testing sessions than LAP2 mice. A trend toward higher FPS was seen in HAP2 mice pretreated with 10.0 mg/kg CORT, and CORT levels were the lowest in this group, suggesting negative feedback inhibition of CORT release.

Mifepristone did not alter FPS. Overall, these results are consistent with data in humans and rodents indicating that lower cortisol/CORT levels after stress are associated with PTSD/PTSD-like behavior. These findings in HAP2 and LAP2 mice suggest that a blunted CORT response to stress may be a biological marker for greater susceptibility to develop PTSD in individuals with increased genetic risk for alcoholism. (PsycINFO

Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors, Addiction Biology-Society for the Study of Addiction; YEAR:

2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Corticosterone

\*Posttraumatic Stress Disorder

\*Preferences Animal Ethology

Genetics Mice Risk Factors

**Source:** PsycINFO

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

75. Association between the A107V substitution in the -opioid receptors and ethanol drinking in mice selected for high and low analgesia.

**Citation:** Addiction Biology, July 2014, vol./is. 19/4(643-651), 1355-6215;1369-1600 (Jul 2014)

Author(s): Sacharczuk, Mariusz; Lesniak, Anna; Lipkowski, Andrzej W; Korostynski, Michal;

Przewlocki, Ryszard; Sadowski, Bogdan

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Genetics and Animal Breeding, Polish Academy of Sciences, Poland

Language: English

**Abstract:** Abstract Experimental evidence suggests that endogenous opioids play an important role

in the development of ethanol addiction. In this study, we employed two mouse lines divergently bred for opioid-mediated stress-induced analgesia. In comparison with HA (high analgesia line) mice, LA (low analgesia line) mice, having lower opioid receptor system activity, manifest enhanced basal as well as stress-induced ethanol drinking. Here, we found that recently discovered C320T transition in exon 2 of the -opioid receptor gene (EU446125.1), which results in an A107V substitution (ACA23171.1), leads to higher ethanol preference in CT mice compared with CC homozygotes. This genetic association is particularly evident under chronic mild stress (CMS) conditions. The interaction between stress and ethanol intake was significantly stronger in HA than in LA mice. Ethanol almost completely attenuated the pro-depressive effect of CMS (assessed with the tail suspension test) in both the CC and CT genotypes in the HA line. In the LA mice, a lack of response to ethanol was observed in the CC genotype, whereas ethanol consumption strengthened depressive-like behaviours in CT individuals. Our results suggest that constitutively active A107V substitution in -opioid receptors may be involved in stress-enhanced vulnerability to ethanol abuse and in the risk of ethanol dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** HOLDER: The Authors, Addiction Biology-Society for the Study of Addiction; YEAR:

2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Addiction

\*Analgesia \*Ethanol \*Opiates Mice

**Source:** PsycINFO

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

76. Expression of HIV gp120 protein increases sensitivity to the rewarding properties of methamphetamine in mice.

**Citation:** Addiction Biology, July 2014, vol./is. 19/4(593-605), 1355-6215;1369-1600 (Jul 2014)

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Medicine, University of California San Diego, La Jolla, CA, US

Language: English

**Abstract:** Abstract Methamphetamine abuse and human immunodeficiency virus (HIV) infection

induce neuropathological changes in corticolimbic brain areas involved in reward and cognitive function. Little is known about the combined effects of methamphetamine and HIV infection on cognitive and reward processes. The HIV/gp120 protein induces neurodegeneration in mice, similar to HIV-induced pathology in humans. We investigated the effects of gp120 expression on associative learning, preference for methamphetamine and non-drug reinforcers, and sensitivity to the conditioned rewarding properties of methamphetamine in transgenic (tg) mice expressing HIV/gp120 protein (gp120-tg). gp120-tg mice learned the operant response for food at the same rate as non-tg mice. In the two-bottle choice procedure with restricted access to drugs, gp120-tg mice exhibited greater preference for methamphetamine and saccharin than non-tg mice, whereas

preference for quinine was similar between genotypes. Under conditions of unrestricted

access to methamphetamine, the mice exhibited a decreased preference for increasing methamphetamine concentrations. However, male gp120-tg mice showed a decreased preference for methamphetamine at lower concentrations than non-tg male mice. gp120-tg mice developed methamphetamine-induced conditioned place preference at lower methamphetamine doses compared with non-tg mice. No differences in methamphetamine pharmacokinetics were found between genotypes. These results indicate that gp120-tg mice exhibit no deficits in associative learning or reward/motivational function for a natural reinforcer. Interestingly, gp120 expression resulted in increased preference for methamphetamine and a highly palatable non-drug reinforcer (saccharin) and increased sensitivity to methamphetamine-induced conditioned reward. These data suggest that HIV-positive individuals may have increased sensitivity to methamphetamine, leading to high methamphetamine abuse potential in this population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors, Addiction Biology-Society for the Study of Addiction; YEAR:

2012

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Drug Sensitivity \*Methamphetamine

\*Proteins

\*Pharmacokinetics

HIV Mice Rewards

Source: PsycINFO

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

77. The heritability of oxycodone reward and concomitant phenotypes in a LG/J x SM/J mouse advanced intercross line

**Citation:** Addiction Biology, July 2014, vol./is. 19/4(552-561), 1355-6215;1369-1600 (Jul 2014)

**Author(s):** Bryant, Camron D; Guido, Michael A; Kole, Loren A; Cheng, Riyan

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University of Chicago, Chicago, IL, US

Language: English

**Abstract:** Abstract The rewarding property of opioids likely contributes to their abuse potential.

Therefore, determining the genetic basis of opioid reward could aid in understanding the neurobiological mechanisms of opioid addiction, provided that it is a heritable trait. Here, we characterized the rewarding property of the widely abused prescription opioid oxycodone (OXY) in the conditioned place preference (CPP) assay using LG/J and SM/J

parental inbred mouse strains and 17 parent-offspring families of a LG/J x SM/J F47/F48 advanced intercross line (AIL). Following OXY training (5 mg/kg, i.p.), SM/J mice and AIL mice, but not LG/J mice, showed an increase in preference for the OXY-paired side, suggesting a genetic basis for OXY-CPP. SM/J mice showed greater locomotor activity than LG/J mice in response to both saline and OXY. LG/J, SM/J, and AIL mice all exhibited robust OXY-induced locomotor sensitization. Narrow-sense heritability (h2) estimates of the phenotypes using linear regression and maximum likelihood estimation showed good agreement (r = 0.91). OXY-CPP was clearly not a heritable trait whereas drug-free- and OXY-induced locomotor activity and sensitization were significantly and sometimes highly heritable (h2 = 0.30-0.84). Interestingly, the number of transitions

between the saline- and OXY-paired sides emerged as a reliably heritable trait following

OXY training (h2 = 0.46-0.66) and could represent a genetic component of drug-seeking behavior. Thus, although OXY-CPP does not appear to be amenable to genome-wide quantitative trait locus mapping, this protocol will be useful for mapping other traits potentially relevant to opioid abuse. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors, Addiction Biology-Society for the Study of Addiction; YEAR:

2012

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Heritability

\*Neurobiology
\*Opiates
Mice
Rewards

Source: PsvcINFO

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

78. Individual differences in cocaine addiction: Maladaptive behavioural traits.

**Citation:** Addiction Biology, July 2014, vol./is. 19/4(517-528), 1355-6215;1369-1600 (Jul 2014)

**Author(s):** Homberg, Judith R; Karel, Peter; Verheij, Michel M. M

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and Behaviour, Centre for Neuroscience, Nijmegen, Netherlands

Language: English

**Abstract:** Abstract Cocaine use leads to addiction in only a subset of individuals. Understanding the

mechanisms underlying these individual differences in the transition from cocaine use to cocaine abuse is important to develop treatment strategies. There is agreement that specific behavioural traits increase the risk for addiction. As such, both high impulsivity and high anxiety have been reported to predict (compulsive) cocaine self-administration behaviour. Here, we set out a new view explaining how these two behavioural traits may affect addictive behaviour. According to psychological and psychiatric evolutionary views, organisms flourish well when they fit (match) their environment by trait and genotype. However, under non-fit conditions, the need to compensate the failure to deal with this environment increases, and, as a consequence, the functional use of rewarding drugs like cocaine may also increase. It suggests that neither impulsivity nor anxiety are bad per se, but that the increased risk to develop cocaine addiction is dependent on whether behavioural traits are adaptive or maladaptive in the environment to which the animals are exposed. This 'behavioural (mal)adaptation view' on individual differences in vulnerability to cocaine addiction may help to improve therapies for addiction.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors, Addiction Biology-Society for the Study of Addiction; YEAR:

2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Behavioral Contrast

\*Cocaine

\*Drug Addiction \*Impulsiveness

\*Individual Differences

Source: PsycINFO

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

79. The German version of the Generalized Pathological Internet Use Scale 2: A validation study.

Citation: Cyberpsychology, Behavior, and Social Networking, July 2014, vol./is. 17/7(474-482),

2152-2715;2152-2723 (Jul 2014)

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Language: English

**Abstract:** The Generalized Pathological Internet Use Scale (GPIUS2) assesses cognitive behavioral

aspects of problematic Internet use. To date, the 15-item scale has only been available in English, and the aim of this study was to translate and validate a German version. An online sample (ON, n = 1,041, age 24.2 + 7.2 years, 46.7% men) completed an Internet version of the translated GPIUS2, and a student sample (OF, n = 841, age 23.5 + 3.0years, 46.8% men) filled in a pencil and paper version. A third sample of 108 students (21.5 + 2.0 years, 25.7% men) completed the questionnaire twice to determine the 14-day retest reliability. Participants also answered questions regarding their Internet use habits (OF, ON) and depression, loneliness, and social anxiety (ON). The internal consistencies were = 0.91 (ON) and = 0.86 (OF). Item-whole correlations ranged from r = 0.53 to r =0.69 (ON) and from r = 0.39 to r = 0.63 (OF). The 2 week retest reliability was rtt = 0.85. Confirmatory factor analyses found a satisfactory fit for the factorial model proposed by Caplan for the original version. The GPIUS2 score correlated moderately with time spent on the Internet for private purposes in a typical week (ON: r = 0.40; OF: r = 0.36). Loneliness, depression, and social anxiety explained 46% of the variance in GPIUS2 scores. The German version of the GPIUS2 has good psychometric properties in a pencil and paper version as well as in a web-based format, and the observations regarding loneliness, depression, and social anxiety support the underlying model. (PsycINFO

Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Mary Ann Liebert, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: \*Internet Addiction

\*Measurement \*Pathology \*Psychometrics \*Test Validity

Cognitive Generalization

Test Construction Test Reliability Internet Usage

**Source:** PsycINFO

80. Repeated exposure to MDMA triggers long-term plasticity of noradrenergic and serotonergic neurons.

**Citation:** Molecular Psychiatry, July 2014, vol./is. 19/7(823-833), 1359-4184;1476-5578 (Jul 2014)

Author(s): Lanteri, C; Doucet, E. L; Vallejo, S. J. Hernandez; Godeheu, G; Bobadilla, A.-C;

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Language: English

**Abstract:** 3,4-Methylenedioxymethamphetamine (MDMA or 'ecstasy') is a psychostimulant drug,

widely used recreationally among young people in Europe and North America. Although its neurotoxicity has been extensively described, little is known about its ability to strengthen neural circuits when administered in a manner that reproduces human abuse (i.e. repeated exposure to a low dose). C57BL/6J mice were repeatedly injected with

MDMA (10 mg kg-1, intraperitoneally) and studied after a 4-day or a 1-month

withdrawal. We show, using in vivo microdialysis and locomotor activity monitoring, that repeated injections of MDMA induce a long-term sensitization of noradrenergic and serotonergic neurons, which correlates with behavioral sensitization. The development of this phenomenon, which lasts for at least 1 month after withdrawal, requires repeated stimulation of 1B-adrenergic and 5-hydroxytryptamine (5-HT)2A receptors. Moreover, behavioral and neuroendocrine assays indicate that hyper-reactivity of noradrenergic and serotonergic networks is associated with a persistent desensitization of somatodendritic 2A-adrenergic and 5-HT1A autoreceptor function. Finally, molecular analysis including radiolabeling, western blot and quantitative reverse transcription-polymerase chain reaction reveals that mice repeatedly treated with MDMA exhibit normal 2A-adrenergic

expression in both locus coeruleus and dorsal raphe nucleus. Altogether, our results show that repeated MDMA exposure causes strong neural and behavioral adaptations and that inhibitory feedback mediated by 2A-adrenergic and 5-HT1A autoreceptors has an important role in the physiopathology of addictive behaviors. (PsycINFO Database

and 5-HT1A receptor binding, but a long-lasting downregulation of Gi proteins

Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR:

2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Methylenedioxymethamphetamine

\*Neural Plasticity
\*Neurotoxicity
\*Sensitization
\*Serotonin
Mice

**Source:** PsycINFO

## 81. Evidence from mouse and man for a role of neuregulin 3 in nicotine dependence.

**Citation:** Molecular Psychiatry, July 2014, vol./is. 19/7(801-810), 1359-4184;1476-5578 (Jul 2014)

Author(s): Turner, J. R; Ray, R; Lee, B; Everett, L; Xiang, J; Jepson, C; Kaestner, K. H; Lerman, C;

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Language: English

**Abstract:** Addiction to nicotine and the ability to quit smoking are influenced by genetic factors. We

used functional genomic approaches (chromatin immunoprecipitation (ChIP) and whole-genome sequencing) to identify cAMP response element-binding protein (CREB) targets following chronic nicotine administration and withdrawal (WD) in rodents. We found that chronic nicotine and WD differentially modulate CREB binding to the gene for neuregulin 3 (NRG3). Quantitative analysis of saline, nicotine and nicotine WD in two biological replicates corroborate this finding, with NRG3 increases in both mRNA and protein following WD from chronic nicotine treatment. To translate these data for human relevance, single-nucleotide polymorphisms (SNPs) across NRG3 were examined for association with prospective smoking cessation among smokers of European ancestry treated with transdermal nicotine in two independent cohorts. Individual SNP and haplotype analysis support the association of NRG3 SNPs and smoking cessation success. NRG3 is a neural-enriched member of the epidermal growth factor family, and a specific ligand for the receptor tyrosine kinase ErbB4, which is also upregulated following nicotine treatment and WD. Mice with significantly reduced levels of NRG3 or pharmacological inhibition of ErbB4 show similar reductions in anxiety following nicotine WD compared with control animals, suggesting a role for NRG3 in nicotine dependence. Although the function of the SNP in NRG3 in humans is not known, these data suggest that Nrg3/ErbB4 signaling may be an important factor in nicotine dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR:

2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: \*Drug Administration Methods

\*Drug Dependency

\*Nicotine
\*Polymorphism
Genetics

Mice

**Source:** PsycINFO

82. You spoke, and we listened: We're growing!

**Citation:** Journal of Clinical Psychiatry, June 2014, vol./is. 75/6(600), 0160-6689 (Jun 2014)

**Author(s):** Shelton, John S

Language: English

**Abstract:** Owing to popular demand, JCP is adding 2 new special sections to our pages on topics

that are of increasing importance to your practice-suicide and addiction. We've appointed highly qualified experts to cover these sections. We are pleased to announce that we are addressing the topic of social media in a very special way. Soon, when you visit JCP online, you will find Social Media and Mental Health, an offering edited by James Niels Rosenquist, MD, PhD. Dr Rosenquist is a pioneer researcher in analyzing behavior exhibited in this new milieu. Social media has quickly become firmly weaved into the

fabric of our society, and its ubiquitous presence has provided opportunities for CNS researchers to examine the flow of diseases throughout the population. Understanding how those suffering from psychiatric disorders utilize social media tools can help to better understand how patients learn about and convey to those around them the, manifestations of their illnesses. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

HOLDER: Physicians Postgraduate Press, Inc.; YEAR: 2014 **Country of Publication:** 

**Publication Type:** Journal: Peer Reviewed Journal

**Subject Headings:** \*Central Nervous System

> \*Psychiatry Addiction Suicide

**PsvcINFO** Source:

#### 83. Review of Adolescents and substance use.

Citation: Social Work Education, July 2014, vol./is. 33/5(699-700), 0261-5479 (Jul 2014)

Author(s): Bowditch, Dave

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Language: English

Abstract: Reviews the book, Adolescents and Substance Use by Philip James, Caitriona Kearns,

> Ann Campbell, and Bobby P. Smyth (2014). This book is intended for practitioners working with adolescents and their families and aims to provide them with background knowledge of substance use issues and a framework for skills development to intervene and make a difference. It begins with a useful outline of the significant physical,

psychological and social changes that take place during adolescence. Whilst drawing on a

range of neuro-scientific research, the information is presented in a clear, concise way which will be of interest and use to social work staff and a range of front-line practitioners. The early chapters frame the propensity of adolescents for risk-taking behavior in the context of maturational processes and highlight the role of parenting style, educational and social environments in the successful acquisition. This book will serve as a very informative introductory text to the issue of substance use for those who work with young people and their families in a range of universal, targeted or specialist settings. It would prove a very useful text for social work students who are looking to broaden their understanding of this issue and for social workers wishing to develop their competence in working effectively with young people who may be using alcohol and other drugs. It

draws on extensive research and whilst it contains many references to the UK and Irish

contexts, many of the concepts, perspectives and examples will have international relevance. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Dave Bowditch; YEAR: 2014

**Publication Type:** Journal: Peer Reviewed Journal

**Subject Headings:** \*Alcohol Drinking Patterns

> \*Drug Usage Alcohol Abuse Drug Abuse Intervention Neurosciences Social Casework **Underage Drinking**

Source: **PsycINFO** 

84. Social work and drug use teaching: A personal view from Lancaster University.

Citation: Social Work Education, July 2014, vol./is. 33/5(685-691), 0261-5479 (Jul 2014)

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**Institution:** Department of Sociology, Bowland College North, Lancaster University, Lancaster,

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Language: English

**Abstract:** This article offers a personal view about teaching the module 'Social Work and Drug Use'

at a university in the North West of England, UK. It describes the establishment of the module and the development of the module content over the years. It discusses the nature of teaching the subject within a research focused establishment and the problems this presents. This is all contextualized within the campaign to have social work and drug use as a compulsory part of the national social work curriculum. (PsycINFO Database Record

(c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Professional Development

\*Professional Standards \*Social Casework

Colleges Curriculum Drug Abuse Drug Usage

Social Work Education

**Teaching** 

Source: PsycINFO

85. Substance use and disabilities: Experiences of adults' social care professionals and the implications for education and training.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(670-684), 0261-5479 (Jul 2014)

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Language: English

**Abstract:** This paper draws on data from a national survey of social workers and social care

practitioners in England undertaken in 2010-2011. It focuses on practitioners working in services for adults with either learning or physical disabilities and, in particular, their experiences of responding to alcohol and other drug use among their service users. Based on secondary analysis of survey and focus group data from the earlier study, the paper outlines the extent to which workers in these areas of practice encounter alcohol and drug problems and discusses the key challenges this poses for them. The findings show that between 4% and 10% of adults' practitioners' service users have alcohol and drug problems depending on the nature of the disability. Regardless of the type of disability, practitioners reported difficulties in talking about substance use with their service users as well as identifying tensions around life-style choice and risk management. They also reported the need for education and training in a number of areas. Social work education and subsequent training in working with substance use problems needs to be available to adults' practitioners and it needs to address the specific issues and needs in different areas of social work practice. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Professional Development

\*Risk Management \*Social Work Education

\*Social Workers Alcohol Abuse Disabilities Drug Abuse

Learning Disabilities

Lifestyle

**Physical Disorders** 

**Source:** PsycINFO

86. Working on treatment teams: Educating social work students to function as addiction specialists within interdisciplinary groups.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(642-655), 0261-5479 (Jul 2014)

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Wayne State University, Detroit, MI, US

Language: English

**Abstract:** Social workers specializing in the addictions field invariably work with multiple

disciplines. Any intervention must be organized in consideration of various fields of practice such as mental health, criminal justice, child welfare, and health care. As part of their education, social workers become adept at understanding the influence of factors associated with physical, mental, and social functioning. Thus, they learn to appreciate the need for interdisciplinary collaboration. However, once students become practitioners, they are often left on their own to solidify their specific role as addiction specialists among several other professionals. Working as a member of an interdisciplinary team can be taught in the classroom. The authors apply Bronstein's model for team collaboration to build a method for teaching interdisciplinary work specific to the role of the addiction specialist. Within the interdisciplinary team model, students take on the various team roles and decide the importance of these roles in a substance use case study. They are taught how to assess, diagnose, identify appropriate evidence-based methods, build client objectives and goals, solidify concrete action plans, and evaluate effectiveness. As these methods have yet to be researched in the classroom, the authors offer recommendations for evaluation and future research. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Social Casework

\*Social Workers Addiction Alcohol Abuse Collaboration Drug Abuse

Interdisciplinary Treatment Approach

Social Work Education

Work Teams

Source: PsycINFO

87. Provider preparedness for treatment of co-occurring disorders: Comparison of social workers and alcohol and drug counselors.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(626-641), 0261-5479 (Jul 2014)

Author(s): Fisher, Colleen M; McCleary, Jennifer Simmelink; Dimock, Peter; Rohovit, Julie

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**Institution:** Minnesota Center for Mental Health, University of Minnesota, St. Paul, MN, US; Tulane

University, New Orleans, LA, US; Minnesota Center for Mental Health, University of Minnesota, St. Paul, MN, US; Minnesota Center for Mental Health, University of

Minnesota, St. Paul, MN, US

Language: English

**Abstract:** Substance use and mental health disorders remain significant behavioral health concerns

in the United States and other Western nations. Nearly half of the 20.3 million adults with substance use disorders in the US have a co-occurring mental illness. Despite growing research support, integrated treatment by providers with expertise in both mental health and substance use is critically lacking. As part of a co-occurring disorders (COD) training initiative in the USA, this study investigated providers' (n = 438) past training, current COD service provision, and future training needs. Specifically, we examined the extent to which social workers were prepared to treat individuals with COD compared to alcohol and drug counselors. Unsurprisingly, social workers reported receiving significantly more mental health related training, while alcohol and drug counselors reported more substance

use related training. Alcohol and drug counselors reported significantly more

COD-specific training including general COD, psychopharmacology, COD treatment, and relapse prevention. Social workers were significantly more likely than alcohol and drug

counselors to report wanting more training in substance use disorders and

culturally-specific intervention techniques. These findings suggest that tailored training and licensure changes are needed to enhance social workers' capacity for competent COD treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

Conference Information: Council on Social Work Education's Annual Program Meeting. Nov, 2013. Dallas. TX,

US. Earlier versions of this article were presented at the aforementioned conference.

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Counselors

\*Health Care Psychology

\*Mental Health
\*Social Workers
Alcohol Abuse

Alcohol Rehabilitation

Comorbidity
Drug Abuse
Drug Rehabilitation
Mental Disorders
Social Work Education

Treatment

Source: PsycINFO

88. Whose responsibility is it? A call for the integration of the knowledge of substance misuse in social work education, practice and research.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(619-625), 0261-5479 (Jul 2014)

**Author(s):** Teater, Barbra

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Social Work, 2800 Victory Boulevard, Staten Island, NY, US, 10314,

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**Institution:** College of Staten Island, City University of New York, Department of Social Work,

Staten Island, NY, US

Language: English

**Abstract:** Comments on the two articles by A. Hutchinson and D. Allnock (see record

2014-28271-004) (see record 2014-28271-005). This commentary is based on the review of two articles written by Hutchinson and Allnock (2014a; 2014b) presented in this journal issue. The commentary reviews the two articles and other research on the integration of substance misuse in social work education, practice and research. Four lessons are presented in terms of how to enhance the knowledge and skills around substance misuse by creating stronger links between social work education, practice and

research. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: \*Professional Development

\*Professional Development \*Social Workers

\*Training
Alcohol Abuse
Continuing Education

Continuing Education

Drug Abuse

**Employment Status** 

Roles

Social Work Education

Source: PsycINFO

89. Implementing rigorous survey methodology within contexts of social work education, training and practice: A case study in substance use.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(605-618), 0261-5479 (Jul 2014)

**Author(s):** Hutchinson, Aisha; Allnock, Debra

Correspondence Address: Hutchinson, Aisha: Tilda Goldberg Centre, University of Bedfordshire, Luton, BDF,

United Kingdom, aisha.hutchinson@beds.ac.uk

**Institution:** University of Bedfordshire, Luton, BDF, United Kingdom; University of Bedfordshire,

Luton, BDF, United Kingdom

Language: English

**Abstract:** With the integration of evidence-based practice central to all areas of social work

education and training across the globe, it is crucial that we continue to engage with the methodological challenges inherent in gathering this evidence, particularly when it is related to the nature of social work education itself. As a result, this paper addresses some of the methodological challenges involved in examining the education available to social workers on engaging with substance use, both within the social work academy and local authorities in England. Drawing on experiences of implementing large scale online surveys from three substantial research projects completed by the authors, this paper highlights four methodological themes: (1) Constructing a representative sampling frame; (2) Identifying participants within organisations with many departments; (3) Response

rates; and (4) Questionnaire design. While these are familiar methodological considerations, this article draws attention to the specific complexities of gathering 'representative' knowledge to inform educational strategies on substance use within social work education and employment contexts. Finally this paper offers lessons learned and guidance for social work academics, students and practitioners who are minded to build, or draw from, an evidence-base using representative samples from and within these environments. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Clinical Practice

\*Methodology

\*Social Casework \*Social Work Education

Alcohol Abuse Drug Abuse Surveys

Source: PsycINFO

90. The development of employment-based education on substance use for social workers in England: Embedding substance use training in frameworks of continuing professional development.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(589-604), 0261-5479 (Jul 2014)

**Author(s):** Hutchinson, Aisha; Allnock, Debra

Correspondence Address: Hutchinson, Aisha: Tilda Goldberg Centre, University of Bedfordshire, University

Square, Luton, BDF, United Kingdom, LU1 3JU, aisha.hutchinson@beds.ac.uk

**Institution:** University of Bedfordshire, Luton, BDF, United Kingdom; University of Bedfordshire,

Luton, BDF, United Kingdom

**Language:** English

**Abstract:** Service users in the social care sector affected by substance use need a workforce which

is skilled at protecting and supporting them, and who are able to carry out their roles and responsibilities with confidence. Workforce/Learning Development departments in children's and adults' services in England play an important role in preparing social workers to engage effectively with service users and to develop as practitioners. Drawing on data from a survey of 94 Workforce/Learning Development departments, this article examines the development of employment-based education on substance use. Only 33% of these departments had a dedicated training strategy or series of programmes on

substance use, although more than half (59%) provided tools for identifying and assessing substance use. A wide range of professionals were involved in the development of this training, particularly those in specialist safeguarding and substance use roles. Social work and substance use textbooks are the main source of materials accessed to support training development. A lack of strategic engagement with substance use in social care was one of the barriers cited to adequate training provision. Implications for social work education include the importance of embedding AOD education in post-qualifying training

frameworks at both university and employer levels. (PsycINFO Database Record (c) 2014

APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Professional Development

\*Social Workers
\*Training
Alcohol Abuse
Continuing Education

Drug Abuse

**Employment Status** 

Roles

Social Work Education

**Source:** PsycINFO

91. The nature and extent of substance use education in qualifying social work programmes in England.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(573-588), 0261-5479 (Jul 2014)

Author(s): Galvani, Sarah; Allnock, Debra

Correspondence Address: Galvani, Sarah: Tilda Goldberg Centre for Social Work and Social Care, Institute of

Applied Social Research, University of Bedfordshire, Park Square, Luton, BDF, United

Kingdom, LU1 3JU, Sarah.Galvani@beds.ac.uk

**Institution:** University of Bedfordshire, Luton, BDF, United Kingdom; University of Bedfordshire,

Luton, BDF, United Kingdom

Language: English

Abstract: Alcohol and other drug (AOD) use is a common feature of modern social work practice.

Concerns about the problematic use of such substances cross all areas of social work practice, including adults' and children's social care. In England, surveys have highlighted social workers' experiences of AOD education during their qualifying social work training. However, this study sought the perspectives of the social work educators. Its primary aim was to explore the nature and extent of education on AODs on the qualifying social work programmes in England. Using an online survey tool, all qualifying social work programme leads were invited to take part (n = 157). Fewer than half responded (40%, n = 63). Initial findings appeared positive suggesting that 94% of responding qualifying programmes provided some teaching and learning on AODs. Further analysis revealed significant variation in what is taught and the depth of coverage. It highlighted a lack of consistency across programmes and possible over-reporting. However, the majority of respondents felt that teaching and learning on AOD use should be a higher priority for their qualifying social work programmes. (PsycINFO Database Record (c)

2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal: Peer Reviewed Journal

**Subject Headings:** \*Drug Abuse

> \*Program Development \*Social Casework \*Social Work Education **Educational Programs**

Source: **PsycINFO** 

92. The extent and nature of practitioners, encounters with alcohol and other drug use in social work and social care practice.

Citation: Social Work Education, July 2014, vol./is. 33/5(557-572), 0261-5479 (Jul 2014)

Author(s): Dance, Cherilyn; Galvani, Sarah; Hutchinson, Aisha

**Correspondence Address:** Dance, Cherilyn: Tilda Goldberg Centre for Social Work and Social Care, Institute of

Applied Social Research, University of Bedfordshire, BDF, United Kingdom,

cherilyn.dance@beds.ac.uk

**Institution:** University of Bedfordshire, BDF, United Kingdom; University of Bedfordshire, BDF,

United Kingdom; University of Bedfordshire, BDF, United Kingdom

Language: English

Abstract: This article considers the extent and nature of social work and social care practitioners'

> experience of working with service users whose lives are affected by the problematic use of alcohol or other drugs (AOD). It draws on the findings of a national study of 'working with alcohol and drug use' which was conducted in England in 2010-2011. The study

reported here comprised an online survey of front-line practitioners (n = 597),

complemented by 12 practitioner focus groups and interviews with 21 key informants from participating local authorities and substance use treatment services. This paper focuses primarily on data from one element of the survey. Findings indicate that the great majority of staff encountered service users who are affected by AOD problems at some level, although there were differences between groups of practitioners in the extent and nature of AOD problems for different groups of service users. The differential

experiences of staff according to their client groups underlines the need for education and professional development not only to provide training on working with AOD but to ensure that training is contextualised and relevant to practitioners across the range of

social work and social care services. (PsycINFO Database Record (c) 2014 APA, all

rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Taylor & Francis; YEAR: 2014 **Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Abuse

\*Drug Abuse

\*Health Care Services
\*Health Personnel Attitudes

\*Social Casework

Clinicians Social Workers

Source: PsycINFO

93. Editorial.

**Citation:** Social Work Education, July 2014, vol./is. 33/5(555-556), 0261-5479 (Jul 2014)

**Author(s):** Loughran, Hilda; Livingston, Wulf

**Institution:** University College Dublin, Dublin, Ireland; Glyndwr University, Wrexham, Wales

Language: English

**Abstract:** Introduces the present issue of Social Work Education. The place afforded substance use

in social work education has been a concern for many in the field for over 30 years. It's difficult to believe that despite efforts of such distinguished academics as Collins (1990) and Harrison (1992) social work education continues to struggle with providing an appropriate and coherent framework for providing knowledge and skills for working with alcohol and other drugs (AOD). The need for such input is supported by ample evidence that social workers in the field are encountering increasing numbers of service users and their families who are experiencing difficulties with AOD problems, if not as the primary reason for referral then often as a related difficulty. This special edition is particularly welcomed because it brings these issues from the peripheral of social work education to centre stage. It seems that despite the obvious need for this shift social work education has been at best inconsistent about adopting this 'new' dimension in substantive curricula

developments. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Abuse

\*Curriculum
\*Drug Abuse
\*Social Casework
\*Social Work Education

**Source:** PsycINFO

94. Infrastructure change is not enough: An evaluation of SAMHSA's mental health transformation state incentive

grants.

**Citation:** Psychiatric Services, July 2014, vol./is. 65/7(947-950), 1075-2730 (Jul 1, 2014)

Author(s): Leff, Stephen; Cichocki, Benjamin; Chow, Clifton M; Lupton, Chuck

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**Institution:** Harvard Medical School, Department of Psychiatry, Cambridge Health Alliance,

Cambridge, MA, US; Human Services Research Institute, Cambridge, MA, US; Department of Economics, Southern New Hampshire University, Manchester, NH, US;

Manila Consulting, McLean, VA, US

Language: English

**Abstract:** Objective: The authors evaluated the Substance Abuse and Mental Health Services

Administration's mental health transformation state incentive grant program, which provided more than \$100 million to nine states to make infrastructure changes designed to improve services and outcomes. Methods: The authors measured infrastructure changes, service changes, and consumer outcomes in the nine programs. Although the federal

program had no logic model, the authors adopted a model that hypothesized positive, but small, correlations between the program elements. Results: There were few statistically significant correlations and a number of negative correlations between infrastructure changes, service changes, and consumer outcomes. Conclusions: Federal investments should take into account evidence that infrastructure changes alone do not necessarily contribute to better consumer outcomes, support operationally defined infrastructure improvements, require that service improvements accompany infrastructure changes, and provide sufficient resources to oversee grantee behaviors. In addition, future evaluation should support evaluation best practices. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Abuse

\*Drug Rehabilitation \*Mental Health Programs

\*Best Practices Incentives

Source: PsycINFO

95. Screening and intervention for comorbid substance disorders, PTSD, depression, and suicide: A trauma center survey.

**Citation:** Psychiatric Services, July 2014, vol./is. 65/7(918-923), 1075-2730 (Jul 1, 2014)

**Author(s):** Love, Jeff; Zatzick, Douglas

Correspondence Address: Zatzick, Douglas, dzatzick@u.washington.edu

**Institution:** Department of Psychiatry and Behavioral Sciences, Harborview Medical Center,

University of Washington, Seattle, WA, US; Department of Psychiatry and Behavioral Sciences, Harborview Medical Center, University of Washington, Seattle, WA, US

Language: English

**Abstract:** Objective: Few investigations have examined screening and intervention procedures for

comorbid substance use and mental disorders at trauma centers in the United States, although these disorders are endemic among survivors of traumatic injury. In 2006, the American College of Surgeons (ACS) mandated that level I and level II trauma centers screen for alcohol use problems and that level I centers provide brief intervention for those who screen positive. The ACS is expected to recommend best practice policy guidelines for screening for drug use problems and posttraumatic stress disorder (PTSD). This study examined screening and intervention procedures for the full spectrum of comorbid mental and substance use disorders at U.S. trauma centers. Methods:

Respondents at all level I and level II trauma centers (N = 518) in the United States were asked to complete a survey describing screening and intervention procedures for alcohol and drug use problems, suicidality, depression, and PTSD. Results: There were 391 (75%) respondents. Over 80% of trauma centers routinely screened for alcohol and drug use problems. Routine screening and intervention for suicidality, depression, and PTSD were markedly less common; in fact, only 7% of centers reported routine screening for PTSD. Consistent with ACS policy, level I centers were significantly more likely than level II

centers to provide alcohol intervention. Conclusions: Alcohol screening and intervention occurred frequently at U.S. trauma centers and appeared to be responsive to ACS mandates. In the future, efforts to orchestrate clinical investigation and policy could enhance screening and intervention procedures for highly prevalent, comorbid mental disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Abuse

\*Health Screening
\*Intervention

\*Posttraumatic Stress Disorder

\*Suicide Comorbidity

Source: PsycINFO

96. Peer recovery support for individuals with substance use disorders: Assessing the evidence.

**Citation:** Psychiatric Services, July 2014, vol./is. 65/7(853-861), 1075-2730 (Jul 1, 2014)

Author(s): Reif, Sharon; Braude, Lisa; Lyman, D. Russell; Dougherty, Richard H; Daniels, Allen S;

Ghose, Sushmita Shoma; Salim, Onaje; Delphin-Rittmon, Miriam E

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**Institution:** Institute for Behavioral Health, Heller School for Social Policy and Management,

Brandeis University, Waltham, MA, US; DMA Health Strategies, Lexington, MA, US; DMA Health Strategies, Lexington, MA, US; DMA Health Strategies, Lexington, MA, US; Westat, Rockville, MD, US; Westat, Rockville, MD, US; Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD, US; Office of Policy, Planning, and Innovation, SAMHSA, Rockville,

MD, US

Language: English

**Abstract:** Objective: Peer recovery support services are delivered by individuals in recovery from

substance use disorders to peers with substance use disorders or cooccurring mental disorders. This review describes the service and assesses its evidence base. Methods: Authors searched PubMed, PsycINFO, Applied Social Sciences Index and Abstracts, Sociological Abstracts, and Social Services Abstracts for outcome studies of peer recovery support services from 1995 through 2012. They found two randomized controlled trials, four quasi-experimental studies, four studies with pre-post service designs, and one review. Authors chose from three levels of evidence (high, moderate, and low) on the basis of benchmarks for the number of studies and quality of their methodology. They also described the evidence of service effectiveness. Results: The studies met the minimum criteria for moderate level of evidence. Studies demonstrated reduced relapse rates, increased treatment retention, improved relationships with treatment providers and social supports, and increased satisfaction with the overall treatment experience. Methodological concerns included inability to distinguish the effects of peer recovery support from other recovery support activities, small samples and heterogeneous populations, lack of consistent or definitive outcomes, and lack of any or appropriate comparison groups. Conclusions: Peer recovery support providers aim to help individuals achieve and maintain recovery, yet studies to date have not tested the key

support, researchers should isolate its effects from other peer-based services. Additional research should solidify its place within the substance use treatment continuum for adults with substance use disorders. (PsycINFO Database Record (c) 2014 APA, all rights

mechanisms of this intervention. To better demonstrate the effectiveness of peer recovery

reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Abuse

\*Drug Rehabilitation \*Evidence Based Practice

\*Support Groups

\*Treatment Effectiveness Evaluation

Peers

**Source:** PsycINFO

97. Daily spiritual experiences and adolescent treatment response.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(271-298),

0734-7324;1544-4538 (Jul 2014)

**Author(s):** Lee, Matthew T; Veta, Paige S; Johnson, Byron R; Pagano, Maria E

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Psychiatry, Division of Child and Adolescent Psychiatry, Case Western Reserve University School of Medicine, Cleveland, OH, US; Institute for Studies on Religion, Baylor University, Waco, TX, US; Department of Psychiatry, Division of Child and Adolescent Psychiatry, Case Western Reserve University School of Medicine, Cleveland,

OH, US

Language: English

**Abstract:** The purpose of this study is to explore changes in belief orientation during treatment and

the impact of increased daily spiritual experiences (DSE) on adolescent treatment response. One-hundred ninety-five adolescents court-referred to a 2-month residential treatment program were assessed at intake and discharge. Forty percent of youth who entered treatment as agnostic or atheist identified themselves as spiritual or religious at discharge. Increased DSE was associated with greater likelihood of abstinence, increased prosocial behaviors, and reduced narcissistic behaviors. Results indicate a shift in DSE that improves youth self-care and care for others that may inform intervention approaches for adolescents with addiction. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

**Conference Information:** Annual Meeting of the American Sociological Association (ASA). 108th. New York. NY,

US. Portions of results of this paper were presented at the aforementioned conference.

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

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Alcohol Abuse

\*Drug Abuse

\*Residential Care Institutions

\*Spirituality

\*Treatment Outcomes

**Source:** PsycINFO

98. A psychodynamic perspective on the efficacy of 12-step programs.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(225-236),

0734-7324;1544-4538 (Jul 2014)

**Author(s):** Khantzian, E. J

Correspondence Address: Khantzian, E. J.: Harvard Medical School, Cambridge (Hospital) Health Alliance, 10-12

Phoenix Row, Haverhill, MA, US, 01832, drejk26@comcast.net

**Institution:** Harvard Medical School, Cambridge (Hospital) Health Alliance, Haverhill, MA, US

Language: English

**Abstract:** The author reviews recent developments in psychoanalytic and psychodynamic theory

and practice and their applications to understanding and treating addicted individuals. Emphasis is placed on experience near, more interactive, and empathic approaches stressing structural, self-psychology, object relations, and attachment theory in contrast to early classical psychoanalytic models that were impassive, detached, and more strictly interpretive in their methods. The contemporary models are adopted to explain and provide a basis for explaining how and why Alcoholics Anonymous works. From this perspective, addiction is understood as a self-regulation disorder involving difficulties in regulating emotions, self-esteem, relationships, and behavior and how the working of AA address and correct these vulnerabilities. (PsycINFO Database Record (c) 2014 APA, all

rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

**Subject Headings:** \*Psychoanalytic Theory

\*Psychodynamics
\*Self Regulation
\*Twelve Step Programs

Self Esteem

Source: PsycINFO

99. Positive emotions and the success of Alcoholics Anonymous.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(214-224),

0734-7324;1544-4538 (Jul 2014)

**Author(s):** Vaillant, George E

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Merrimac Street, 2nd Floor, Boston, MA, US, 02114, gvaillant@partners.org

**Institution:** Department of Psychiatry, Massachusetts General Hospital, Boston, MA, US

Language: English

**Abstract:** Alcoholics Anonymous (AA) works because it discovered the use of positive emotions as

a therapeutic tool 50 years before academic psychology discovered positive psychology. First, AA's emphasis on admitting dependence on and attachment to others, leads to the positive emotion of love and second, the recognition that to keep it you have to give it away, leading to the positive emotion of joy. The first three Steps of AA involve turning oneself over to a trusted other as long as it is not "me" (AA has always been clear that the definition of "God" was the alcoholic's choice) is to allow oneself to feel loved. The second component of AA is guiding new members toward joy via the last two Steps of AA. The 12th step, of course, is "As the result of these Steps: we tried to carry this message to alcoholics, and to practice these principles (positive emotions) in all our affairs." Secure attachment (a.k.a. love), as extrapolated from brain-imaging studies of mother-child attachment, is like addiction associated with reduction in amygdala firing and increases in nucleus accumbens activity. Imaging researchers have found that the joy of giving to your favorite charity, like taking cocaine, stimulates the nucleus accumbens. In short, like methadone in opiate addiction, the positive emotions induced by AA provide a safe, nonpharmacological substitute for alcohol. (PsycINFO Database Record (c) 2014

APA, all rights reserved) (journal abstract)

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

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholics Anonymous

\*Emotions

\*Positive Psychology Attachment Behavior Relapse Prevention

**Source:** PsycINFO

100. Buddhist mindfulness as an influence in recent empirical CBT approaches to addiction: Convergence with the Alcoholics Anonymous model.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(194-213),

0734-7324;1544-4538 (Jul 2014)

**Author(s):** Dermatis, Helen; Egelko, Susan

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**Institution:** Division of Alcoholism and Drug Abuse, Department of Psychiatry, NYU School of

Medicine, New York, NY, US; Department of Psychiatry, Mount Sinai School of

Medicine, New York, NY, US

Language: English

**Abstract:** This article explores the convergence of the Alcoholics Anonymous (AA) model for

addictions with recent advances in empirically supported cognitive-behavioral therapy (CBT) for addictions. This convergence stems from CBT entering its "third wave," which

incorporates techniques associated with mindfulness, meditation, and Buddhist philosophy and practice. Research findings associated with various third-wave CBT treatment programs on substance abuse outcome will be reviewed. Implications for

research on 12-Step interventions based on areas of convergence of these

psychotherapeutic approaches are also discussed. (PsycINFO Database Record (c) 2014

APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholics Anonymous

\*Buddhists

\*Cognitive Behavior Therapy

\*Mindfulness

**Source:** PsycINFO

101. The neurocircuitry of attachment and recovery in Alcoholics Anonymous.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(173-193),

0734-7324;1544-4538 (Jul 2014)

**Author(s):** Fricchione, Gregory

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Hospital, 55 Fruit Street, Boston, MA, US, 02114, gfricchione@partners.org

**Institution:** Division of Psychiatry and Medicine, Department of Psychiatry, Massachusetts General

Hospital, Boston, MA, US

Language: English

**Abstract:** Neurophysiological circuitries mediate avoidance and approach by valencing events and

establishing a reward-based gradient. Normal separation-attachment behaviors and end goals maintain attractiveness along this gradient. Circumstances-abnormal in nature and/or adverse in nurturance-can lead to pathogenic circuits. Attachment-related disorders such as substance use disorders may result. The case is made that addiction represents a distortion of separation-attachment circuitries brought about by receptor systems hijacked by substances. Spirituality may help patients meet the challenge of this substance-induced distortion. Perhaps the greatest examples are to be found in the 12-Step programs for alcoholism and drug addiction. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

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

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholics Anonymous

\*Alcoholism

\*Recovery (Disorders)

Avoidance Neurochemistry

Rewards

**Source:** PsycINFO

102. Editorial.

**Citation:** Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(107), 0734-7324;1544-4538

(Jul 2014)

**Author(s):** McGovern, Thomas F

**Institution:** Department of Psychiatry, Texas Tech University Health Sciences Center, Lubbock, TX,

US

Language: English

**Abstract:** This editorial provides an overview of the papers presented in this issue of Alcoholism

Treatment Quarterly (ATQ). This issue presents an insightful and timely update of many aspects of the Alcoholics Anonymous (AA) experience, with particular attention to the role of spirituality in the recovery process. The interplay between neurocircuitry, psychological mechanisms, cognitive/ emotional well-being, and mindfulness are seen in their relationship to recovery in an AA setting. This issue also accounts for gender differences, physician recovery, spiritual awakening, and cultural considerations in its comprehensive description of the spiritual dimensions of recovery in an AA framework.

(PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Rehabilitation

\*Alcoholics Anonymous

\*Alcoholism \*Treatment

Source: PsycINFO

103. Review of Critical perspectives on addiction. Advances in medical sociology.

**Citation:** Sociology of Health & Illness, June 2014, vol./is. 36/5(788-789), 0141-9889;1467-9566

(Jun 2014)

**Author(s):** Elliott, Lawrie

**Institution:** Edinburgh Napier University, Edinburgh, United Kingdom

Language: English

**Abstract:** Reviews the book, Critical Perspectives on Addiction. Advances in Medical Sociology

edited by Julie Netherland (2012). This is an interesting collection of chapters that provide a sociological perspective on addiction and are well worth reading. The authors challenge the dominant medical and biomedical perspectives on addiction. As a sociological text the book makes extremely interesting reading. However, if you are looking for new sociological theories of addiction you may be disappointed. The content is also very US-centred and is possibly shaped by the dominant narratives in that country: for example, the war on drugs and abstinence. Although Part IV is devoted to the voice of ordinary people - and, in so doing, provides a counterpoint to the dominant medicalisation of addiction - in my opinion it does not go far enough in acknowledging the now large literature on recovery in mental health and the growing literature on addiction recovery. For this reason it could have provided a more optimistic analysis. Having said this, I would definitely recommend the book to anyone who is interested in developing a broader, more up-to-date and critical perspective on addictions. (PsycINFO Database

Record (c) 2014 APA, all rights reserved)

Country of Publication: STATEMENT: Published by John Wiley & Sons.; HOLDER: The Authors. Sociology of

Health & Illness-Foundation for the Sociology of Health & Illness/John Wiley & Sons

Ltd.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

**Subject Headings:** \*Addiction

\*Medical Model \*Sociology Optimism

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in *Sociology of Health and Illness* 

104. Prevalence of the use of anabolic-androgenic steroids in Brazil: A systematic review.

Citation: Substance Use & Misuse, July 2014, vol./is. 49/9(1156-1162), 1082-6084;1532-2491 (Jul

2014)

Author(s): Abrahin, Odilon Salim Costa; de Sousa, Evitom Correa; Santos, Azenildo Moura

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**Institution:** Programa de Pos-graduação em Educação Fisica, Universidade Federal de Sergipe,

Brazil; Laboratorio de Exercicio Resistido e Saude/LERES, Universidade do Estado do Para, Brazil; Instituto de Saude Coletiva, Universidade Federal da Bahia, Brazil

**Language:** English

**Abstract:** The use of Anabolic-Androgenic Steroids (AAS) is increasing among practitioners of

recreational physical activity. The aim of this research was to evaluate the prevalence of AAS in practitioners of recreational physical activity in Brazil. After systematic review of four databases, 14 articles were included. The results indicate that the prevalence of AAS varied between 2.1% and 31.6%, according to the region analyzed and the sample characteristics. The study's limitations are noted. (PsycINFO Database Record (c) 2014

APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Physical Activity

\*Steroids Drug Usage

Source: PsycINFO

Full Text: Available from Informa Healthcare in Substance Use and Misuse

105. Anabolic-androgenic steroid use among Brazilian bodybuilders.

**Citation:** Substance Use & Misuse, July 2014, vol./is. 49/9(1138-1145), 1082-6084;1532-2491 (Jul

2014)

Author(s): de Siqueira Nogueira, Fabiana Ranielle; de Freitas Brito, Aline; de Oliveira, Caio Victor

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Performance and Health, Federal University of Paraiba (UFPB), Joao Pessoa, Brazil; Center for Health Sciences for Health (CCS), Federal University of Paraiba (UFPB), Joao

Pessoa, Brazil

Language: English

**Abstract:** This cross-sectional, quantitative, exploratory study investigated the prevalence and

profile of anabolic-androgenic steroids (AAS) users amongst a convenience sample of 510 bodybuilders from 52 gyms, in Joao Pessoa, Brazil, with a structured questionnaire containing selected questions about socioeconomic and training variables on the use of AAS. Data were analyzed using frequency and chi-square tests. AAS prevalence use was 20.6%; mostly young men (98.1%), of a low education level (46.7%), who trained for more than 4 years (49.5%). The use of AAS was related to the use of dietary supplements. About 81% of consumed AAS consisted of Deca-Durabolin, Winstrol, and Sustanon. Study's limitations are noted. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

**Country of Publication:** HOLDER: Informa Healthcare USA, Inc.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Athletes

\*Steroids

Athletic Training Drug Usage

Socioeconomic Status

Source: PsycINFO

Full Text: Available from Informa Healthcare in Substance Use and Misuse

106. The influence of concomitant use of alcohol, tobacco, cocaine, and anabolic steroids on lipid profiles of Brazilian recreational bodybuilders.

**Citation:** Substance Use & Misuse, July 2014, vol./is. 49/9(1115-1125), 1082-6084;1532-2491 (Jul

2014)

Author(s): Schwingel, Paulo Adriano; Zoppi, Claudio Cesar; Cotrim, Helma Pinchemel

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**Institution:** Programa de Pos-graduação em Medicina e Saude (PPgMS), Faculdade de Medicina da

Bahia (FMB), Universidade Federal da Bahia (UFBA), Salvador, Brazil; Departamento de Nutricao, Universidade de Pernambuco (UPE), Petrolina, Brazil; Programa de Pos-graduação em Medicina e Saude (PPgMS), Faculdade de Medicina da Bahia (FMB),

Universidade Federal da Bahia (UFBA), Salvador, Brazil

Language: English

**Abstract:** Anabolic-androgenic steroids (AAS) are used to enhance physical performance and/or

appearance. The aim of this study was to evaluate the influence of the concomitant use of alcohol, tobacco, cocaine, and AAS on blood lipid profiles of 145 asymptomatic male bodybuilders from the Northeast region of Brazil. Interviews, clinical exams, and serological evaluations were performed on all participants between 2007 and 2009. All subjects' self-reported use of testosterone or its derivatives, 118 individuals reported alcohol intake, 27-reported cigarette smoking, and 33 confirmed cocaine use. Four subjects were users of all drugs at the same time. Higher levels of total cholesterol and LDL-cholesterol were observed among concomitant users of alcohol, tobacco, cocaine, and AAS. The study's limitations are noted. (PsycINFO Database Record (c) 2014 APA,

all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Drinking Patterns

\*Cocaine
\*Lipids
\*Steroids

\*Tobacco Smoking Cardiovascular Disorders

Drug Usage

**Source:** PsycINFO

Full Text: Available from Informa Healthcare in Substance Use and Misuse

107. Review of E-safety for the I-generation: Combating the misuse and abuse of technology in schools.

**Citation:** Child Abuse Review, May 2014, vol./is. 23/3(229), 0952-9136;1099-0852 (May-Jun

2014)

**Author(s):** Mitchell, Ruth

**Institution:** Edinburgh Napier University, Edinburgh, United Kingdom

Language: English

**Abstract:** Reviews the book, E-Safety for the I-Generation: Combating the Misuse and Abuse of

Technology in Schools by Nikki Giant (2013). It is argued that this book, although written primarily for use in schools, is a worthwhile addition to the bookshelf of any professional with a responsibility for child protection. It assumes limited knowledge on the part of the reader and goes on to provide a comprehensive overview of the topic of E-safety, which the author explains is the safe and responsible use of information communication

technology. According to the author, in the USA 58 per cent of 12-year olds own a phone

and 93 per cent aged 12-19 go online. Access to social networking sites, instant

messaging, online chat rooms, gaming devices, text and picture messaging and blogs all pose a potential threat to the users, particularly children and young people. The risks that they face include physical danger, sexual abuse and bullying, to say nothing of the obsessive, addictive nature of information communication technology itself, the full effect of which may not be known for years to come. (PsycINFO Database Record (c) 2014

APA, all rights reserved)

Country of Publication: HOLDER: John Wiley & Sons, Ltd.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Internet

\*Bullying

\*Online Social Networks

Safety Technology

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in *Child Abuse Review* 

108. Role of gender, substance use, and serious mental illness in anticipated postjail homelessness.

**Citation:** Social Work Research, June 2014, vol./is. 38/2(107-116), 1070-5309 (Jun 2014)

**Author(s):** Fries, Lauren; Fedock, Gina; Kubiak, Sheryl Pimlott

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**Institution:** School of Social Work, Michigan State University, East Lansing, MI, US; School of

Social Work, Michigan State University, East Lansing, MI, US; School of Social Work,

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Language: English

**Abstract:** Incarcerated individuals, particularly women, experience high rates of mental health and

substance use disorders, potentially placing them at an increased risk for homelessness. This study examined factors associated with anticipated postjail homelessness among men and women (N = 725) incarcerated in an urban county jail. Participants were categorized into three groups on the basis of scores of screening measures for substance misuse and mental illness: (1) substance use disorder only, (2) serious mental illness or co-occurring substance use disorder (SMI/COD), and (3) no disorder. Gender differences within the three groups were examined, and logistic regressions were used to assess factors associated with anticipated postjail homelessness. Women were more likely than men to be homeless prejail and present with a serious mental illness, a substance use disorder, or both. SMI/COD and gender, but not substance use disorder only, were significantly associated with anticipated postjail homelessness. Women were twice as likely as men to anticipate postjail homelessness. Results display the complexity of service needs among women in the criminal justice system and support the need for services that address mental illness and substance use within the jail setting to reduce long-term homelessness. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

Country of Publication: HOLDER: National Association of Social Workers; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Mental Disorders

\*Mental Health

\*Sex Roles

Human Females

Human Sex Differences

**Source:** PsycINFO

Full Text: Available from Oxford University Press in Social Work Research

109. Ten-year trends in self-reported family and psychological problems among Swedish adolescents.

**Citation:** European Journal of Mental Health, June 2014, vol./is. 9/1(54-67), 1788-4934 (Jun 2014)

**Author(s):** Ybrandt, Helene

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**Institution:** Umea Universitet, Institutionen for Psykologi, Umea, Sweden

Language: English

**Abstract:** The aim of the study was to compare problem severity among Swedish adolescents, using

self-reported and interviewer-rated data from 2000 and 2010, gathered with the Adolescent Drug Abuse Diagnosis (ADAD) interview. Data relating to family

relationships, psychological status and problems were collected in two samples randomly selected from the adolescent population aged 15-17 years (121 adolescents in the year 2000 and 485 adolescents in the year 2010). The results show that the self-rated and interviewer-rated problem severity of adolescents in 2000 and in 2010 seems to be unchanged, with no increased polarisation for sex and socio-economic groups. There was a difference, however, was of girls reporting more severe problems in family relationships

compared to boys. In 2010, compared to 2000, adolescents reported on fewer

psychological problems (e.g. experiences of serious anxiety and tension, comprehension and concentration disorder, memory loss and, in addition, with relationships in and outside the family sphere-e.g. problems with getting along with siblings, and with trusting other people). In order to promote the mental health of adolescents it is essential during the next decade to reveal relationship problems, such as problems of insecurity with people outside the family. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

Country of Publication: HOLDER: Semmelweis University Institute of Mental Health, Budapest; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Abuse

\*Family Relations
\*Mental Disorders

\*Trends Diagnosis

**Source:** PsycINFO

110. Portuguese validation of the Internet Addiction Test: An empirical study.

**Citation:** Journal of Behavioral Addictions, June 2014, vol./is. 3/2(107-114), 2062-5871;2063-5303

(Jun 2014)

**Author(s):** Pontes, Halley M; Patrao, Ivone M; Griffiths, Mark D

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**Institution:** International Gaming Research Unit, Nottingham Trent University, Nottingham, United

Kingdom; Unidade de Investigacao em Psicologia e Saude, ISPA-Instituto Universitario,

Lisbon, Portugal; International Gaming Research Unit, Nottingham Trent University,

Nottingham, United Kingdom

Language: English

**Abstract:** Background and aims: Research into Internet addiction (IA) has increased greatly over

the last decade. Despite its various definitions and general lack of consensus regarding its conceptualisation amongst researchers, instruments for measuring this phenomenon have proliferated in a number of countries. There has been little research on IA in Portugal and this may be partly due to the absence of standardised measurement tools for assessing IA. Methods: This study attempted to address this issue by adapting a Portuguese version of

the Internet Addiction Test (IAT) via a translation-back translation process and

Confirmatory Factor Analysis in a sample of 593 Portuguese students that completed a Portuguese version of the IAT along with questions related to socio-demographic variables. Results: The findings suggested that the IAT appears to be a valid and reliable instrument for measuring IA among Portuguese young adults as demonstrated by its satisfactory psychometric properties. However, the present findings also suggest the need to reword and update some of the IAT's items. Prevalence of IA found in the sample was 1.2% and is discussed alongside findings relating to socio-demographic correlates. Limitations and implications of the present study are also discussed. Conclusions: The

present study calls for a reflection of the IAT while also contributing to a better understanding of the basic aspects of IA in the Portuguese community since many health practitioners are starting to realise that Internet use may pose a risk for some individuals.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Internet Addiction

\*Test Reliability \*Test Validity Factor Analysis

Source: PsycINFO

111. Towards an understanding of Internet-based problem shopping behaviour: The concept of online shopping addiction and its proposed predictors.

**Citation:** Journal of Behavioral Addictions, June 2014, vol./is. 3/2(83-89), 2062-5871;2063-5303

(Jun 2014)

Author(s): Rose, Susan; Dhandayudham, Arun

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**Institution:** Henley Business School, University of Reading, Henley-on-Thames, OXF, United

Kingdom; CRI-Northamptonshire, Northampton, HTH, United Kingdom

Language: English

**Abstract:** Background: Compulsive and addictive forms of consumption and buying behaviour have

been researched in both business and medical literature. Shopping enabled via the Internet now introduces new features to the shopping experience that translate to positive benefits for the shopper. Evidence now suggests that this new shopping experience may lead to problematic online shopping behaviour. This paper provides a theoretical review of the literature relevant to online shopping addiction (OSA). Based on this selective review, a conceptual model of OSA is presented. Method: The selective review of the literature draws on searches within databases relevant to both clinical and consumer behaviour literature including EBSCO, ABI Pro-Quest, Web of Science-Social Citations Index, Medline, PsycINFO and Pubmed. The article reviews current thinking on problematic, and specifically addictive, behaviour in relation to online shopping. Results: The review of the literature enables the extension of existing knowledge into the Internet-context. A conceptual model of OSA is developed with theoretical support provided for the inclusion of 7 predictor variables: low self-esteem, low self-regulation; negative emotional state;

enjoyment; female gender; social anonymity and cognitive overload. The construct of

OSA is defined and six component criteria of OSA are proposed based on established technological addiction criteria. Conclusions: Current Internet-based shopping experiences may trigger problematic behaviours which can be classified on a spectrum which at the extreme end incorporates OSA. The development of a conceptual model provides a basis for the future measurement and testing of proposed predictor variables and the outcome variable OSA. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Electronic Commerce

\*Internet Addiction

\*Shopping Behavior Prediction

**Source:** PsycINFO

112. The development of a diversity mentoring program for faculty and trainees: A program at the Brown Clinical Psychology Training Consortium.

**Citation:** the Behavior Therapist, June 2014, vol./is. 37/5(121-126), 0278-8403 (Jun 2014)

**Author(s):** de Dios, Marcel A; Kuo, Caroline; Hernandez, Lynn; Clark, Uraina S; Wenze, Susan J;

Boisseau, Christina L; Hunter, Heather L; Reddy, Madhavi K; Tolou-Shams, Marina;

Zlotnick, Caron

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US; Alpert Medical School, Brown University, Providence, RI, US

Language: English

**Abstract:** This paper reports on the development and pilot implementation of a formalized diversity

mentoring program involving Brown's Department of Psychiatry and Human Behavior (DPHB), the Center for Alcohol and Addiction Studies (CAAS), the Department of Behavioral and Social Sciences, the Brown Clinical Psychology Training Consortium, and the affiliated hospitals and centers. The authors aimed to develop a focused mentorship to junior faculty and trainees with the underlying goal of promoting an academic climate supportive of diversity. The mentors and mentees were invited to complete a confidential online program evaluation survey. Surveys assessed participants' satisfaction with the mentoring program and their mentoring relationship, and whether the program was successful in helping to meet their goals. Within the period of 1 year, the authors were able to develop and implement a diversity mentorship program within a multisite, multidepartmental Training Consortium in a medical school setting. One of the challenges faced in developing our program was the issue of how to account for the variability of mentor skills and experience with respect to mentorship specifically focused

on diversity. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Clinical Psychology Graduate Training

\*Educational Personnel \*Medical Students

\*Mentor

\*Program Development

Diversity

**Source:** PsycINFO

113. Letter to the editor.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(486-487), 0735-0414;1464-3502

(Jul-Aug 2014)

**Author(s):** Etcheverrigaray, F; Cholet, J; Sauvaget, A; Guerlais, M; Jolliet, P; Grall-Bronnec, M;

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**Institution:** Center for Evaluation and Information on Pharmacodependence, Clinical Pharmacology

Department, Nantes University Hospital, Nantes, France; Addictology and Psychiatry Department, Nantes University Hospital, Nantes, France; Addictology and Psychiatry Department, Nantes University Hospital, Nantes, France; Center for Evaluation and Information on Pharmacodependence, Clinical Pharmacology Department, Nantes University Hospital, Nantes, France; Center for Evaluation and Information on Pharmacodependence, Clinical Pharmacology Department, Nantes University Hospital, Nantes, France; Addictology and Psychiatry Department, Nantes University Hospital, Nantes, France; Center for Evaluation and Information on Pharmacodependence, Clinical

Pharmacology Department, Nantes University Hospital, Nantes, France

Language: English

**Abstract:** Presents a case report of a male 43-yr-old who, from the age of 15, has been drinking

every day, especially spirits (whiskey), contemporarily with a break of family ties. From the age of 33, three bottles of wine a day were consumed (i.e. 21 units of alcohol per day), referring to anxiolytic, hedonic and sensory effects. He never succeeded to stop his excessive alcohol consumption despite several attempts. When he was 42, he was admitted into hospital after a traffic accident under the influence of alcohol. During the 3 weeks he remained in hospital, detoxification was obtained using oxazepam with

decreasing dosages. After hospital discharge, oxazepam was replaced by hydroxyzine 50

mg in case of anxiety and tetrazepam was prescribed, initially for musculoskeletal disorders. Due to its misuse, tetrazepam was replaced by TCC 4 mg twice a day to relieve his pain and avoid benzodiazepine use. Posology remained stable afterwards. The patient found he regained control over alcohol use, as he could drink one glass socially and then

stop. He did not feel alcohol withdrawal symptoms since he was treated by TCC, but detachment from the beverage, and therefore never lost control of its use anymore.

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights

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reserved.; HOLDER: The Author; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Abuse

\*Alcoholism
\*Benzodiazepines
Case Report

**Source:** PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

114. Review of The Convalescent.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(484), 0735-0414;1464-3502 (Jul-Aug

2014)

**Author(s):** Kelly, Maria

Correspondence Address: Kelly, Maria, dr.m.kelly@castlecraig.co.uk

**Institution:** Castle Craig Hospital, Peeblesshire, United Kingdom

Language: English

**Abstract:** Reviews the book, The Convalescent by Peter Gilmour (2013). This book is a tale of one

journey back from the depths of alcoholism. He has lost everything his work, his wife and children, his home, his self-respect. He stays intoxicated to avoid another fit. He cares about nothing. But his mother is found murdered, and he coasts through the funeral, family encounters and destruction of his childhood home from within his intoxicated cocoon. This tale will strike chords not least because many more of us will reach old age

than ever before. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

\*Recovery (Disorders)

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

115. Quality of life depends on the drinking pattern in alcohol-dependent patients.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(457-465), 0735-0414;1464-3502

(Jul-Aug 2014)

Author(s): Daeppen, Jean-Bernard; Faouzi, Mohamed; Sanchez, Nathalie; Rahhali, Nora; Bineau,

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Language: English

Abstract: Aims: In patients with alcohol dependence, health-related quality of life (QOL) is reduced

was to describe the evolution of health-related QOL in adults with alcohol dependence during a 24-month period after initial assessment for alcohol-related treatment in a routine practice setting, and its relation to drinking pattern which was evaluated across clusters based on the predominant pattern of alcohol use, set against the influence of baseline variables Methods: The Medical Outcomes Study 36-Item Short-Form Survey (MOS-SF-36) was used to measure QOL at baseline and quarterly for 2 years among participants in CONTROL, a prospective observational study of patients initiating treatment for alcohol dependence. The sample consisted of 160 adults with alcohol dependence (65.6% males) with a mean (SD) age of 45.6 (12.0) years. Alcohol use data were collected using TimeLine Follow-Back. Based on the participant's reported alcohol use, three clusters were identified: 52 (32.5%) mostly abstainers, 64 (40.0%) mostly moderate drinkers and 44 (27.5%) mostly heavy drinkers. Mixed-effect linear regression analysis was used to identify factors that were potentially associated with the mental and physical summary MOS-SF-36 scores at each time point. Results: The mean (SD)

compared with that of a normal healthy population. The objective of the current analysis

MOS-SF-36 mental component summary score (range 0-100, norm 50) was 35.7 (13.6) at baseline [mostly abstainers: 40.4 (14.6); mostly moderate drinkers 35.6 (12.4); mostly heavy drinkers 30.1 (12.1)]. The score improved to 43.1 (13.4) at 3 months [mostly abstainers: 47.4 (12.3); mostly moderate drinkers 44.2 (12.7); mostly heavy drinkers 35.1

(12.9)], to 47.3 (11.4) at 12 months [mostly abstainers: 51.7 (9.7); mostly moderate

drinkers 44.8 (11.9); mostly heavy drinkers 44.1 (11.3)], and to 46.6 (11.1) at 24 months [mostly abstainers: 49.2 (11.6); mostly moderate drinkers 45.7 (11.9); mostly heavy drinkers 43.7 (8.8)]. Mixed-effect linear regression multivariate analyses indicated that there was a significant association between a lower 2-year follow-up MOS-SF-36 mental score and being a mostly heavy drinker (-6.97, P < 0.001) or mostly moderate drinker (-3.34 points, P = 0.018) [compared to mostly abstainers], being female (-3.73, P = 0.004), and having a Beck Inventory scale score > 8 (-6.54, P < 0.001), at baseline. The mean (SD) MOS-SF-36 physical component summary score was 48.8 (10.6) at baseline, remained stable over the follow-up and did not differ across the three clusters.

Mixed-effect linear regression univariate analyses found that the average 2-year follow-up MOS-SF-36 physical score was increased (compared with mostly abstainers) in mostly heavy drinkers (+ 4.44, P = 0.007); no other variables tested influenced the MOS-SF-36 physical score. Conclusion: Among individuals with alcohol dependence, a rapid improvement was seen in the mental dimension of QOL following treatment initiation, which was maintained during 24 months. Improvement was associated with the pattern of alcohol use, becoming close to the general population norm in patients classified as mostly abstainers, improving substantially in mostly moderate drinkers and improving only slightly in mostly heavy drinkers. The physical dimension of QOL was generally in the normal range but was not associated with drinking patterns. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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 Drinking Patterns

\*Alcohol Rehabilitation

\*Alcoholism
\*Quality of Life

Source: PsycINFO

**Country of Publication:** 

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

116. Utilization of baclofen in maintenance of alcohol abstinence in patients with alcohol dependence and alcoholic hepatitis with or without cirrhosis.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(453-456), 0735-0414;1464-3502

(Jul-Aug 2014)

**Author(s):** Yamini, David; Lee, Scott Hyunsoo; Avanesyan, Armine; Walter, Michael; Runyon,

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Department of Gastroenterology, Loma Linda University, Loma Linda, CA, US; Division of Digestive Diseases, David Geffen School of Medicine, UCLA, Los Angeles, CA, US

Language: English

**Abstract:** Aim: To report the efficacy and safety of baclofen in improving clinical state in patients

effects of baclofen utilized over 12 months in patients with alcoholic hepatitis with or without cirrhosis and alcohol dependence on these liver parameters: aspartate aminotransferase (AST), alanine aminotransferase (ALT), total bilirubin (Tbili), prothrombin time (PT), international normalized ratio (INR), albumin and Model for End-Stage Liver Disease (MELD) score. Results: Out of 40 patients, 35 were treated with baclofen. On average, baclofen was used for 5.8 months. A significant decrease in the

with alcoholic hepatitis. Method: Single center, open, retrospective study analyzing the

mean AST, ALT, Tbili, INR, PT and MELD score was seen when comparing pre-baclofen use compared with post-baclofen use. Of the 35 patients who were started on baclofen, 34 (97%) remained abstinent. There were no serious adverse events. Conclusions: Baclofen's

safety and efficacy in improving the clinical condition patients with alcoholic liver disease has been supported. Randomized prospective studies with longer duration of baclofen in this population may further optimize its use and corroborate efficacy. (PsycINFO Database Record (c) 2014 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
\*Baclofen
\*Hepatitis
\*Sobriety
Cirrhosis (Liver)

**Source:** PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

117. Acceptance of controlled drinking among treatment specialists of alcohol dependence in Japan.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(447-452), 0735-0414;1464-3502

(Jul-Aug 2014)

Author(s): Higuchi, Susumu; Maesato, Hitoshi; Yoshimura, Atsushi; Matsushita, Sachio

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**Institution:** National Hospital Organization Kurihama Medical and Addiction Center, Kanagawa,

Japan; National Hospital Organization Kurihama Medical and Addiction Center, Kanagawa, Japan; National Hospital Organization Kurihama Medical and Addiction Center, Kanagawa, Japan; National Hospital Organization Kurihama Medical and

Addiction Center, Kanagawa, Japan

Language: English

**Abstract:** Aims: This study evaluated the acceptance of controlled drinking (CD) goals among

physicians specializing in the treatment of alcohol dependence (AD) in Japan. Methods: A mailed questionnaire survey was sent to physician members of the Japanese Society of Alcohol-Related Problems (n = 232) who were specialists in the treatment of AD in Japan. The evaluated items included the acceptance of CD goals, the definition of CD, the reasons for accepting or rejecting CD and the patient factors used to make treatment-goal decisions. Results: CD as an interim goal on the way toward abstinence was accepted by about two-thirds of the specialists, while CD as a final goal was accepted by about one-third of specialists. Specialists supported harm-free drinking and a satisfactory quality of life, rather than alcohol consumption limits, as the definition of CD. Of note, a significantly higher percentage of specialists who rejected CD, compared with those who accepted CD, supported the disease model of AD as grounds for their decision. Specialists who accepted CD relied mostly on factors such as the severity of dependence, attitude toward CD and abstinence, and the level of psychological dependence and social stability, when making treatment-goal decisions. Conclusion: CD was accepted as an interim goal by two-thirds and as a final goal by one-third of Japanese physician specialists. Despite differences in drinking cultures and treatment circumstances, great similarities were found between this study and those conducted in Europe and North America with regard to the

reasoning of treatment providers and the use of patient characteristics to make

treatment-goal decisions. (PsycINFO Database Record (c) 2014 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 Drinking Patterns

\*Alcohol Rehabilitation

\*Alcoholism

\*Health Personnel Attitudes

\*Physicians Family Physicians

Treatment

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

118. Awareness and treatment of alcohol dependence in Japan: Results from internet-based surveys in persons, family, physicians and society.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(430-438), 0735-0414;1464-3502

(Jul-Aug 2014)

Author(s): Taguchi, Yurie; Takei, Yoshiyuki; Sasai, Ryoko; Murteira, Susana

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105-0001, yrta@lundbeck.com

**Institution:** Lundbeck Japan K.K., Tokyo, Japan; Department of Gastroenterology and Hepatology,

Mie University Graduate School of Medicine, Tsu-city, Japan; Lundbeck Japan K.K.,

Tokyo, Japan; Lundbeck Japan K.K., Tokyo, Japan

**Language:** English

**Abstract:** Aims: To understand current awareness of, and views on, treatment of alcohol

dependence in Japan. Methods: (a) Nationwide internet-based survey of 520 individuals,

consisting of 52 diagnosed alcohol-dependent (AD) persons, 154 potentially

alcohol-dependent (ADP) persons, 104 family members and 106 friends/colleagues of AD persons, and 104 general individuals, derived from a consumer panel where the response rate was 64.3%. We enquired into awareness about the treatment of alcohol dependence and patient pathways through the healthcare network. (b) Nationwide internet-based survey of physicians (response rate 10.1% (2395/23,695) to ask 200 physicians about

their management of alcohol use disorders). Results: We deduced that 10% of alcohol-dependent Japanese persons had ever been diagnosed with alcohol dependence, with only 3% ever treated. Regarding putative treatment goals, 20-25% of the AD and ADP persons would prefer to attempt to abstain, while 60-75% preferred 'reduced drinking.' A half of the responding physicians considered abstinence as the primary treatment goal in alcohol dependence, while 76% considered reduced drinking as an acceptable goal. Conclusion: AD and ADP persons in Japan have low 'disease awareness' defined as 'understanding of signs, symptoms and consequences of alcohol use disorders,' which is in line with the overseas situation. The Japanese drinking culture and stigma toward alcohol dependence may contribute to such low disease awareness and current challenging treatment environment. While abstinence remains the preferred treatment goal among physicians, reduced drinking seems to be an acceptable alternative treatment goal to many persons and physicians in Japan. (PsycINFO Database Record (c) 2014

APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Medical Council on Alcohol and Oxford University Press. This is an Open

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the original work is properly cited.; HOLDER: The Author; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcohol Rehabilitation

\*Alcoholism \*Awareness

\*Surveys Alcohols Internet Physicians Society Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

119. How accurate are blood (or breath) tests for identifying self-reported heavy drinking among people with alcohol dependence?

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(423-429), 0735-0414;1464-3502

(Jul-Aug 2014)

Author(s): Bertholet, Nicolas; Winter, Michael R; Cheng, Debbie M; Samet, Jeffrey H; Saitz,

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**Institution:** Alcohol Treatment Center, Department of Community Medicine and Health, Lausanne

University Hospital, Lausanne, Switzerland; Data Coordinating Center, Boston University School of Public Health, Boston, MA, US; Clinical Addiction Research and Education Unit, Section of General Internal Medicine, Boston University and Boston Medical Center, Boston, MA, US; Clinical Addiction Research and Education Unit, Section of General Internal Medicine, Boston University and Boston Medical Center, Boston, MA, US; Data Coordinating Center, Boston University School of Public Health, Boston, MA,

US

Language: English

**Abstract:** Aims: Managing patients with alcohol dependence includes assessment for heavy

drinking, typically by asking patients. Some recommend biomarkers to detect heavy drinking but evidence of accuracy is limited. Methods: Among people with dependence, we assessed the performance of disialo-carbohydrate-deficient transferrin (%dCDT, > 1.7%), gamma-glutamyltransferase (GGT, > 66 U/l), either %dCDT or GGT positive, and breath alcohol (> 0) for identifying 3 self-reported heavy drinking levels: any heavy drinking (> 4 drinks/day or > 7 drinks/week for women, > 5 drinks/day or > 14 drinks/week for men), recurrent (> 5 drinks/day on > 5 days) and persistent heavy drinking (> 5 drinks/day on > 7 consecutive days). Subjects (n = 402) with dependence and current heavy drinking were referred to primary care and assessed 6 months later with biomarkers and validated self-reported calendar method assessment of past 30-day alcohol use. Results: The self-reported prevalence of any, recurrent and persistent heavy drinking was 54, 34 and 17%. Sensitivity of %dCDT for detecting any, recurrent and persistent self-reported heavy drinking was 41, 53 and 66%. Specificity was 96, 90 and 84%, respectively. %dCDT had higher sensitivity than GGT and breath test for each alcohol use level but was not adequately sensitive to detect heavy drinking (missing 34-59% of the cases). Either %dCDT or GGT positive improved sensitivity but not to

satisfactory levels, and specificity decreased. Neither a breath test nor GGT was sufficiently sensitive (both tests missed 70-80% of cases). Conclusions: Although biomarkers may provide some useful information, their sensitivity is low the incremental value over self-report in clinical settings is questionable. (PsycINFO Database Record (c)

2014 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 Abuse

\*Biological Markers

\*Blood Alcohol Concentration

\*Self Report

Alcohol Rehabilitation

Alcoholism Blood

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

120. Effects of ceftriaxone on systemic and central expression of anti- and pro-inflammatory cytokines in alcohol-preferring (P) rats exposed to ethanol.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(390-398), 0735-0414;1464-3502

(Jul-Aug 2014)

Author(s): Rao, P. S. S; Ahmed, S; Sari, Y

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Pharmaceutical Sciences, Toledo, OH, US; Department of Pharmacology, University of Toledo, College of Pharmacy and Pharmaceutical Sciences, Toledo, OH, US; Department of Pharmacology, University of Toledo, College of Pharmacy and Pharmaceutical

Sciences, Toledo, OH, US

Language: English

**Abstract:** Aims: Determine the effect of reduction in ethanol consumption by alcohol-preferring (P)

rats, following ceftriaxone treatment, on the cytokines levels in prefrontal cortex (PFC) and plasma. Methods: Following 5 weeks of free access to ethanol (15 and 30%), P rats were treated daily with ceftriaxone or saline vehicle for either 2 or 5 consecutive days. Plasma and PFC were collected from ceftriaxone- and saline vehicle-treated groups, and assayed for the levels of pro- and anti-inflammatory cytokines. Results: A significant increase in the plasma level of anti-inflammatory cytokine IL-10 was observed in the ceftriaxone-treated group when compared with the saline-treated group in both the 2-day and 5-day treatments. Furthermore, ceftriaxone treatment for 2 days induced reduction in TNF level in both plasma and PFC. Additionally, ceftriaxone treatment for 2 days

significantly reduced the IFN level in PFC. Conclusion: These findings show the ability of ceftriaxone to reduce alcohol consumption and induce modulation of the

anti-inflammatory and proinflammatory cytokines levels in P rats. (PsycINFO Database

Record (c) 2014 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

\*Animal Models
\*Antibiotics
\*Cytokines
\*Ethanol

Alcohol Drinking Patterns Alcohol Rehabilitation

**Drug Therapy** 

Rats

Side Effects (Drug)

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

121. Chronic ethanol consumption increases myocardial mitochondrial DNA mutations: A potential contribution by mitochondrial topoisomerases.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(381-389), 0735-0414;1464-3502

(Jul-Aug 2014)

Author(s): Laurent, D; Mathew, J. E; Mitry, M; Taft, M; Force, A; Edwards, J. G

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**Institution:** Department of Physiology, New York Medical College, Valhalla, NY, US; Department of

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Valhalla, NY, US

Language: English

**Abstract:** Aims: Alcoholic cardiomyopathy (ACM) presents as decreased myocardial contractility,

arrhythmias and secondary non-ischemic dilated cardiomyopathy leading to heart failure. Mitochondrial dysfunction is known to have a significant role in the development and complications of ACM. This study investigated if chronic ethanol feeding promoted myocardial mitochondrial topo-isomerase dysfunction as one underlying cause of mitochondrial DNA (mtDNA) damage and mitochondrial dysfunction in ACM. Methods: The impact of chronic ethanol exposure on the myocardial mitochondria was examined in both neonatal cardiomyocytes using 50 mM ethanol for 6 days and in rats assigned to control or ethanol feeding groups for 4 months. Results: Chronic ethanol feeding led to significant (P < 0.05) decreases in M-mode Fractional Shortening, ejection fraction, and the cardiac output index as well as increases in Tau. Ethanol feeding promoted mitochondrial dysfunction as evidenced by significantly decreased left ventricle cytochrome oxidase activity and decreases in mitochondrial protein content. Both in rats

and in cultured cardiomyocytes, chronic ethanol presentation significantly increased mtDNA damage. Using isolated myocardial mitochondria, both mitochondrial topoisomerase-dependent DNA cleavage and DNA relaxation were significantly altered by ethanol feeding. Conclusion: Chronic ethanol feeding compromised cardiovascular and mitochondrial function as a result of a decline in mtDNA integrity that was in part the

consequence of mitochondrial topoisomerase dysfunction. Understanding the regulation of the mitochondrial topoisomerases is critical for protection of mtDNA, not only for the management of alcoholic cardiomyopathy, but also for the many other clinical treatments that targets the topoisomerases in the alcoholic patient. (PsycINFO Database Record (c)

2014 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

\*Animal Models

\*DNA
\*Ethanol
\*Mutations

Mitochondria

**Source:** PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

122. Alcoholic liver disease: A synopsis of the Charles Lieber's Memorial Symposia 2009-2012.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(373-380), 0735-0414;1464-3502

(Jul-Aug 2014)

Author(s): Neuman, Manuela G; Cohen, Lawrence; Zakhari, Samir; Nanau, Radu M; Mueller,

Sebastian; Schneider, Michelle; Parry, Charles; Isip, Romina; Seitz, Helmut K

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Alcoholism, National Institutes of Health, Bethesda, MD, US; In Vitro Drug Safety and Biotechnology, University of Toronto, Toronto, ON, Canada; Centre of Alcohol Research, University of Heidelberg, Salem Medical Centre, Heidelberg, Germany; Alcohol and Drug Abuse Research Unit, Medical Research Council, Stellenbosch University, Cape Town, South Africa; Alcohol and Drug Abuse Research Unit, Medical Research Council,

Stellenbosch University, Cape Town, South Africa; In Vitro Drug Safety and

Biotechnology, University of Toronto, Toronto, ON, Canada; Centre of Alcohol Research,

University of Heidelberg, Salem Medical Centre, Heidelberg, Germany

Language: English

**Abstract:** This paper is based upon the 'Charles Lieber Satellite Symposia' organized by Manuela G.

Neuman at each of the 2009-2012 Research Society on Alcoholism (RSA) Annual Meetings. The presentations represent a broad spectrum dealing with alcoholic liver disease (ALD). In addition, a literature search (2008-2013) in the discussed area was performed in order to obtain updated data. The presentations are focused on genetic polymorphisms of ethanol metabolizing enzymes and the role of cytochrome P4502E1 (CYP2E1) in ALD. In addition, alcohol-mediated hepatocarcinogenesis, immune response to alcohol and fibrogenesis in alcoholic hepatitis as well as its co-morbidities with chronic viral hepatitis infections in the presence or absence of human deficiency virus are discussed. Finally, emphasis was led on alcohol and drug interactions as well as liver transplantation for end-stage ALD. (PsycINFO Database Record (c) 2014 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

\*Enzymes \*Liver Disorders \*Polymorphism

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism

123. Implicit motives and basic need satisfaction in extreme endurance sports.

Citation: Journal of Sport & Exercise Psychology, June 2014, vol./is. 36/3(293-302),

0895-2779;1543-2904 (Jun 2014)

Author(s): Schuler, Julia; Wegner, Mirko; Knechtle, Beat Correspondence Address: Schuler, Julia, julia.schueler@ispw.unibe.ch

**Institution:** Institute of Sport Science, University of Bern, Bern, Switzerland; Institute of Sport

Science, University of Bern, Bern, Switzerland; Institute of General Practice and Health

Services Research, University of Zurich, Zurich, Switzerland

Language: English

**Country of Publication:** 

**Abstract:** Previous research has shown that the effects of basic psychological needs on the flow

experience in sports are moderated by implicit motives. However, so far, only leisure and health-oriented sports have been analyzed. In a pilot study and a main study ( $N=29,\,93$ ), we tested whether the implicit achievement and affiliation motives interact with the need for competence and the need for social relatedness satisfaction, respectively, to predict flow experience and well-being in extreme endurance athletes. Results showed that highly achievement- motivated individuals benefited more from the need for competence satisfaction in terms of flow than individuals with a low achievement motive did. In addition, highly affiliation-motivated individuals whose need for social relatedness is

satisfied reported higher positive affect and lower exercise addiction scores than athletes with a low motive. We discuss the differential effects of the interplay between the achievement and affiliation motives and basic needs on different outcome variables.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

HOLDER: Human Kinetics, Inc.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Athletes

\*Endurance
\*Motivation
\*Need Satisfaction
\*Psychological Needs

**Sports** 

**Source:** PsycINFO

### 124. Impulse control in Parkinson's disease.

**Original Title:** Eine Einfuhrung in Impulskontrollstorungen bei Morbus Parkinson.

Citation: Zeitschrift fur Neuropsychologie, March 2014, vol./is. 25/1(7-15), 1016-264X (Mar

2014)

**Author(s):** Heldmann, Marcus; Al-Khaled, Mohamed; Hagenah, Johann; Munte, Thomas F

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Lubeck, Germany, 23538, marcus.heldmann@neuro.uni-luebeck.de

**Institution:** Klinik fur Neurologie, Universitat zu Lubeck, Lubeck, Germany; Klinik fur Neurologie,

Universitat zu Lubeck, Lubeck, Germany; Klinik fur Neurologie, Westkustenklinikum Heide, Heide, Germany; Klinik fur Neurologie, Universitat zu Lubeck, Lubeck, Germany

Language: German

**Abstract:** Impulse control disorders in Parkinson's disease (PD) are mainly observed in connection

with a medication with dopamine agonists. They are seen in up to 17 % of such treated patients and comprise pathological gambling, pathological buying, compulsive sexual behavior and binge eating disorder. Besides the medication with dopamine agonists, an individual vulnerability, possibly of genetic origin, seems a necessary prerequisite for these disorders to occur. Functional imaging studies have shown a diminished activation of the reward system in response to rewards. In addition, dramatic differences in the activity of frontolimbic control areas have been observed between PD patients with and without impulse-control disorders. An experimentally tractable consequence of increased impulsivity in PD is a steeper delay discounting function in intertemporal choice paradigms. This review concludes with a discussion of the practical consequences of the research findings on impulse-control disorders for the management of PD patients.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: \*Impulse Control Disorders

\*Parkinson's Disease Consumer Behavior Dopamine Agonists

Genetics

Pathological Gambling Sexual Addiction Binge Eating Disorder

**Source:** PsycINFO

### 125. Co-occurring substance use disorders and PTSD.

Citation: A practical guide to PTSD treatment: Pharmacological and psychotherapeutic

approaches., 2015(135-150) (2015)

**Author(s):** Saxon, Andrew J; Simpson, Tracy L

**Institution:** Center of Excellence in Substance Abuse Treatment and Education, VA Puget Sound

Health Care System, Seattle, WA, US; Center of Excellence in Substance Abuse Treatment and Education, VA Puget Sound Health Care System, Seattle, WA, US

Language: English

**Abstract:** (from the chapter) Posttraumatic stress disorder (PTSD) and substance use disorders

(SUDs) frequently co-occur (Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995). When

the two do co-occur, considerable psychopathologic interplay typically emerges,

suggesting the need for treatment of both disorders; however, only a sparse evidence base exists to guide optimal psychopharmacologic or psychotherapeutic treatment for patients with both PTSD and SUD. This chapter reviews the available evidence on treatment of SUD in the presence of PTSD (Berenz & Coffey, 2012; Petrakis et al., 2006; Riggs & Foa, 2008), mentions SUD-specific treatments that clinical experience suggests should be provided to patients with both disorders even if not yet well studied, and speculates on some interventions that might serve to treat both disorders simultaneously (Kaysen et al., 2014; Raskind et al., 2007; Simpson et al., 2009; Yeh et al., 2011). Some aspects of these topics were recently reviewed in detail (Norman et al., 2012). (PsycINFO Database

Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** \*Comorbidity

\*Drug Abuse

\*Posttraumatic Stress Disorder

\*Treatment

Drug Rehabilitation Drug Therapy Psychotherapy

**Source:** PsycINFO

126. How can virtual reality interventions help reduce prescription opioid drug misuse?

Citation: Cyberpsychology, Behavior, and Social Networking, June 2014, vol./is. 17/6(331-332),

2152-2715;2152-2723 (Jun 2014)

**Author(s):** Wiederhold, Brenda K; Riva, Giuseppe; Wiederhold, Mark D

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**Institution:** Virtual Reality Medical Institute, Brussels, Belgium; Department of Psychology, Catholic

University of Milan, Milan, Italy; Virtual Reality Medical Center (VRMC), San Diego,

CA, US

**Language:** English

**Abstract:** This editorial discusses the use of virtual reality interventions for the reduction of

prescription opioid drug misuse. The editor and others involved in Virtual Reality research have made strides in showing the effectiveness of "various psychological techniques, including distraction by virtual reality environments and the playing of video games, [which] are being employed to treat pain. Perhaps if additional dollars were

directed to support evidence-based research on both the psychological and

neurophysiological mechanisms related to pain, and the effectiveness of these non drug modalities, we would be able to make a significant contribution to reducing. The analysis

of neurophysiological mechanisms may also lead to the development of new

psychological interventions that can target these changes in a much more specific manner than pharmacological interventions. (PsycINFO Database Record (c) 2014 APA, all rights

reserved)

**Country of Publication:** HOLDER: Mary Ann Liebert, Inc.

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Abuse

\*Intervention \*Opiates

\*Virtual Reality

**Source:** PsycINFO

### 127. Review of Belonging: Solidarity and division in modern societies.

**Citation:** Sociology, June 2014, vol./is. 48/3(625-627), 0038-0385;1469-8684 (Jun 2014)

**Author(s):** O'Toole, Therese

**Institution:** University of Bristol, Bristol, United Kingdom

**Language:** English

**Abstract:** Reviews the book, Belonging: Solidarity and Division in Modern Societies by Montserrat

Guibernau (2013). This book identifies 'belonging by choice' as a defining trait of contemporary society - sometimes leading individuals choosing to give up the freedoms associated with modernity in order to belong. Indeed, Guibernau argues, growing freedom is accompanied by the countervailing force of dependency, including submission to leaders, compulsive conformity and addictions of various kinds. In addressing the challenges thrown up by the desire to belong, Guibernau highlights tensions over forms of religious belonging, and particularly over claims for recognition of religious identities by Muslims, when these are seen to clash with secular European culture. Her analysis, at times, seems to assimilate narratives about the incompatibility of Islam with secular European culture. Guibernau poses a dichotomy between political and religious (Islamic)

loyalties that turns on the 'Western secular principle of separation between state and church', a distinction that is not valid within Islam. (PsycINFO Database Record (c) 2014

APA, all rights reserved)

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

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Narratives

\*Religious Beliefs

\*Society

\*Sociocultural Factors

Muslims

Source: PsycINFO

## 128. Weber Syndrome secondary to synthetic cannabinoid use.

Original Title: Sentetik kanabinoid kullanimina bagli gelisen Weber Sendromu.

Citation: Anadolu Psikiyatri Dergisi, March 2014, vol./is. 15/Suppl 1(S25-S27), 1302-6631 (Mar

2014)

**Author(s):** Karabulut, Sercan; Yargic, Lutfi Ilhan

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**Institution:** Istanbul Universitesi, Istanbul Tip Fakultesi, Psikiyatri Klinigi, Istanbul, Turkey; Istanbul

Universitesi, Istanbul Tip Fakultesi, Psikiyatri Klinigi, Istanbul, Turkey

Language: Turkish

**Abstract:** Synthetic cannabinoid abuse may lead to physical and psychological disorders. This

substance has disseminated rapidly in recent years and the literature about its bad consequences is rather sparse. In this study, we aimed to introduce a patient who present with mesencephalon infarctus (Weber Syndrome) after using synthetic cannabinoid. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Cannabinoids

\*Drug Abuse \*Mesencephalon Mental Disorders Physical Disorders

Source: PsycINFO

Full Text: Available from *ProQuest* in *Anadolu Psikiyatri Dergisi*; Note: ; Collection notes: If asked

to log in click "Athens Login" and then select "NHSEngland" in the drop down list of

institutions.

129. Benzydamine abuse in a case with psychosis related to multiple substance abuse.

Original Title: Coklu madde kullanimina bagli bir psikoz olgusunda benzidamin kotuye kullanimi.

Citation: Anadolu Psikiyatri Dergisi, March 2014, vol./is. 15/Suppl 1(S4-S6), 1302-6631 (Mar

2014)

Author(s): Aydin, Pinar Cetinay; Ozgen, Guliz; Cekic, Miray

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**Institution:** Mazhar Osman Bakirkoy Ruh ve Sinir Hastaliklari Egitim ve Arajtirma Hastanesi,

Psikiyatri Klinigi, Istanbul, Turkey; Mazhar Osman Bakirkoy Ruh ve Sinir Hastaliklari Egitim ve Arajtirma Hastanesi, Psikiyatri Klinigi, Istanbul, Turkey; Mazhar Osman Bakirkoy Ruh ve Sinir Hastaliklari Egitim ve Arajtirma Hastanesi, Psikiyatri Klinigi,

Istanbul, Turkey

Language: Turkish

**Abstract:** In Turkey, benzydamine hydrochloride is an analgesic and anti-inflammatory drug sold

with commercial names such as Tantum, Tanflex, Benzidan. Recommended daily intake for benzydamine hydrochloride is 150-200 mg. Intake between 500-3000 mg results in furor and delirante effects. Higher doses of benzydamine hydrochloride can lead to dry mouth, convulsion and paranoia. This article contains arguments about a patient who abuses substances such as thinner, Bally, marijuana, ecstasy as they initially begin using, benzydamine hydrochloride to relieve pain and muscle then later on continue using it for its pleasurable effects discussed previously. Objective is to draw attention to widespread use of this preparation due to its analgesic and anti-inflammatory effects in many areas of medicine, which is vulnerable to abuse. (PsycINFO Database Record (c) 2014 APA, all

rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Anti Inflammatory Drugs

\*Prug Abuse
\*Psychosis
Analgesic Drugs
Side Effects (Drug)

Source: PsycINFO

**Full Text:** Available from *ProQuest* in *Anadolu Psikiyatri Dergisi*; Note: ; Collection notes: If asked

to log in click "Athens Login" and then select "NHSEngland" in the drop down list of

institutions.

130. Adolescent alcohol and substance abuse.

Citation: Essentials of global mental health., 2014(231-242) (2014)

Author(s): Felton, Julia W; Adams, Zachary W; MacPherson, Laura; Danielson, Carla Kmett

**Institution:** Department of Psychology, University of Maryland, College Park, MD, US; National

Crime Victims Research & Treatment Center, Department of Psychiatry & Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; Department of Psychology, University of Maryland, College Park, MD, US; National Crime Victims Research & Treatment Center, Medical University of South Carolina, Charleston, SC, US

Language: English

**Abstract:** (from the chapter) This chapter outlines the literature on the prevalence of adolescent

substance use worldwide and describes empirically supported treatments for adolescent

substance abuse. These findings are discussed with regard to promoting a better

understanding of adolescent substance use internationally and addressing the current barriers and opportunities for disseminating effective interventions on a global scale.

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**Publication Type:** Book; Edited Book

Subject Headings: \*Adolescent Development

\*Alcohol Abuse \*Drug Abuse \*Epidemiology

\*Evidence Based Practice

Intervention

**Source:** PsycINFO

131. The emergency department social work intervention for mild traumatic brain injury (SWIFT-Acute): A pilot

study.

**Citation:** Brain Injury, April 2014, vol./is. 28/4(448-455), 0269-9052;1362-301X (Apr 2014)

Author(s): Moore, Megan; Winkelman, Amy; Kwong, Sharon; Segal, Steven P; Manley, Geoffrey T;

Shumway, Martha

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**Institution:** School of Social Work, University of Washington, Seattle, WA, US; Brain and Spinal

Cord Injury Center, University of California, San Francisco, CA, US; Department of Social Services, San Francisco General Hospital and Trauma Center, San Francisco, CA, US; School of Social Welfare, University of California, Berkeley, CA, US; Brain and Spinal Cord Injury Center, University of California, San Francisco, CA, US; Department

of Psychiatry, University of California, San Francisco, CA, US

Language: English

**Abstract:** Objective: To determine acceptability and preliminary effectiveness of Emergency

Department (ED) Social Work Intervention for Mild Traumatic Brain Injury (SWIFT-Acute) on alcohol use, community functioning, depression, anxiety,

post-concussive symptoms, post-traumatic stress disorder and service use. Methods: This study enrolled 64 patients who received head CT after mild traumatic brain injury (mTBI) and were discharged <24 hours from a Level 1 trauma centre ED. The cohort study compared outcomes for SWIFT-Acute (n = 32) and Usual Care (n = 32) 3 months post-injury. SWIFT-Acute includes education about symptoms and decreasing alcohol use, coping strategies, reassurance and education about recovery process and follow-up guidelines and resources. Measures: Alcohol Use Disorders Identification Test (AUDIT), Community Integration Questionnaire (CIQ), Patient Health Questionnaire-4, Rivermead Post-concussion Symptoms Questionnaire, PTSD Checklist-Civilian, acceptability and service use surveys. Results: Paired t-test revealed SWIFT-Acute group maintained pre-injury community functioning; Usual Care significantly declined in functioning on the CIQ. Both groups reported 'hazardous' pre-injury drinking on AUDIT. Wilcoxon Signed Rank test showed the SWIFT-Acute group significantly reduced alcohol use; the Usual Care group did not. Both groups significantly increased medical service use. No statistically significant differences were found on other measures. Acceptability ratings were extremely high. Conclusions: SWIFT-Acute was acceptable to patients. There is preliminary evidence of effectiveness for reducing alcohol use and preventing functional decline. Future randomized studies are needed. (PsycINFO Database Record (c) 2014

APA, all rights reserved) (journal abstract)
HOLDER: Informa UK Ltd.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Emergency Services

**Country of Publication:** 

\*Social Casework \*Traumatic Brain Injury

Alcoholism Intervention **Source:** PsycINFO

**Full Text:** Available from *Informa Healthcare* in *Brain Injury* 

132. Substance use and criminality: A review.

Original Title: Middelengebruik en criminaliteit: een overzicht.

**Citation:** Tijdschrift voor Psychiatrie, 2014, vol./is. 56/1(32-39), 0303-7339;1875-7456 (2014)

Author(s): Lammers, S. M. M; Soe-Agnie, S. E; De Haan, H. A; Bakkum, G. A. M; Pomp, E. R;

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Netherlands; Tactus Verslavingszorg, Deventer, Netherlands; Expertisecentrum

Forensische Psychiatrie, Utrecht, Netherlands; Expertisecentrum Forensische Psychiatrie,

Utrecht, Netherlands; Radboud Universiteit, Nijmegen, Netherlands

Language: Dutch

**Abstract:** Background: Substance use regularly co-occurs with many types of criminality, including

violent behaviour. Aim: To review the relationships between substance abuse and criminality, which can involve violent behaviour. Method: We searched the literature for meta-analyses, reviews and empirical articles about relationships between the problematic

use of and addiction to psychoactive substances on the one hand and antisocial and aggressive behaviour and recidivism on the other hand. Results: In the case of both men and women there are significant relationships between substance abuse and criminal behavior. The majority of substance users, however, are not criminals and most of the offences they commit can be termed 'acquisitive offences'. The relationship between alcohol and violence is stronger than the relationship between substance abuse and

violence. Furthermore, it is only in cocaine users that we find indications that psychopharmacological effects stimulate violent behaviour. A number of factors, particularly interactions, determine whether substance abusers are criminal and are violent. Violent behaviour can result from interactions between the severity of illness caused by substance abuse, individual psychological, social and neurobiological

characteristics, situational factors and expectancies regarding the psychopharmacological effects of a particular substance. Conclusion: Substance abuse, particulary the

combination of alcohol and drugs, is a predictor of criminality and criminal recidivism.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Criminal Behavior

\*Drug Usage \*Violence Drug Addiction

Drugs

Psychopharmacology

**Source:** PsycINFO

133. Review of Deviance and risk on holiday: An ethnography of British tourists in Ibiza.

Citation: Howard Journal of Criminal Justice, May 2014, vol./is. 53/2(213-214),

0265-5527;1468-2311 (May 2014)

**Author(s):** Sloan, Jennifer

**Institution:** University of Sheffield, Sheffield, England

Language: English

**Abstract:** Reviews the book, Deviance and Risk on Holiday: An Ethnography of British Tourists in

Ibiza by D. Briggs (2013). The book is excellent in setting the scene-you can almost hear, feel and smell what he describes within (which is not always pleasant!). In addition,

Briggs ties in his accounts of the 'real' with the media, discussing popular films and television accounts of similar holiday styles which adds an extra dimension to the book. This book is an important read for anyone interested in ethnography, the night time economy, deviance, youth, drink and drugs cultures, or merely with a curious disposition (or wishing to know more about the British Ibiza experience). It is a compelling read, with an enormous amount of raw and engaging data, which I would highly recommend. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: STATEMENT: Published by John Wiley & Sons Ltd.; HOLDER: The Howard League

and John Wiley & Sons Ltd.; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Usage

\*Ethnography \*Holidays \*Tourism

Source: PsycINFO

134. Altered neural processing of the need to stop in young adults at risk for stimulant dependence.

Citation: The Journal of Neuroscience, March 2014, vol./is. 34/13(4567-4580),

0270-6474;1529-2401 (Mar 26, 2014)

Author(s): Harle, Katia M; Shenoy, Pradeep; Stewart, Jennifer L; Tapert, Susan F; Yu, Angela J;

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Department of Psychiatry, University of California San Diego, La Jolla, CA, US

Language: English

**Abstract:** Identification of neurocognitive predictors of substance dependence is an important step

in developing approaches to prevent addiction. Given evidence of inhibitory control deficits in substance abusers (Monterosso et al., 2005; Fu et al., 2008; Lawrence et al., 2009; Tabibnia et al., 2011), we examined neural processing characteristics in human occasional stimulant users (OSU), a population at risk for dependence. A total of 158 nondependent OSU and 47 stimulant-naive control subjects (CS) were recruited and completed a stop signal task while undergoing functional magnetic resonance imaging (fMRI). A Bayesian ideal observer model was used to predict probabilistic expectations of inhibitory demand, P(stop), on a trial-to-trial basis, based on experienced trial history. Compared with CS, OSU showed attenuated neural activation related to P(stop)

magnitude in several areas, including left prefrontal cortex and left caudate. OSU also showed reduced neural activation in the dorsal anterior cingulate cortex (dACC) and right insula in response to an unsigned Bayesian prediction error representing the discrepancy between stimulus outcome and the predicted probability of a stop trial. These results indicate that, despite minimal overt behavioral manifestations, OSU use fewer brain processing resources to predict and update the need for response inhibition, processes that are critical for adjusting and optimizing behavioral performance, which may provide a biomarker for the development of substance dependence. (PsycINFO Database Record (c)

2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Age Differences

\*CNS Stimulating Drugs

\*Biological Neural Networks

\*Cingulate Cortex

\*Functional Magnetic Resonance Imaging

**Risk Factors** 

Source: PsycINFO

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

135. MeCP2 phosphorylation limits psychostimulant-induced behavioral and neuronal plasticity.

Citation: The Journal of Neuroscience, March 2014, vol./is. 34/13(4519-4527),

0270-6474;1529-2401 (Mar 26, 2014)

Author(s): Deng, Jie V; Wan, Yehong; Wang, Xiaoting; Cohen, Sonia; Wetsel, William C;

Greenberg, Michael E; Kenny, Paul J; Calakos, Nicole; West, Anne E

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**Institution:** Department of Neurobiology, Duke University Medical Center, Durham, NC, US; Center

for Translational Neuroscience, Department of Neurology, Duke University Medical Center, Durham, NC, US; Department of Neurobiology, Duke University Medical Center, Durham, NC, US; Department of Neurobiology, Harvard Medical School, Boston, MA, US; Department of Neurobiology, Duke University Medical Center, Durham, NC, US; Department of Neurobiology, Harvard Medical School, Boston, MA, US; Department of Pharmacology and Systems Therapeutics, Icahn School of Medicine at Mount Sinai, New York, NY, US; Department of Neurobiology, Duke University Medical Center, Durham, NC, US; Department of Neurobiology, Duke University Medical Center, Durham, NC,

US

Language: English

**Abstract:** The methyl-DNA binding protein MeCP2 is emerging as an important regulator of drug

reinforcement processes. Psychostimulants induce phosphorylation of MeCP2 at Ser421;

however, the functional significance of this posttranslational modification for

addictive-like behaviors was unknown. Here we show that MeCP2 Ser421Ala knock-in mice display both a reduced threshold for the induction of locomotor sensitization by investigator-administered amphetamine and enhanced behavioral sensitivity to the reinforcing properties of self-administered cocaine. These behavioral differences were accompanied in the knock-in mice by changes in medium spiny neuron intrinsic excitability and nucleus accumbens gene expression typically observed in association with repeated exposure to these drugs. These data show that phosphorylation ofMeCP2at Ser421 functions to limit the circuit plasticities in the nucleus accumbens that underlie addictive-like behaviors. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

(journal abstract)

**Country of Publication:** HOLDER: The Authors; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Animal Ethology

\*CNS Stimulating Drugs

\*Locomotion
\*Neural Plasticity
\*Nucleus Accumbens

Mice

Source: PsycINFO

Full Text: Available from Highwire Press in Journal of Neuroscience

136. Cue-induced craving increases impulsivity via changes in striatal value signals in problem gamblers.

Citation: The Journal of Neuroscience, March 2014, vol./is. 34/13(4750-4755),

0270-6474;1529-2401 (Mar 26, 2014)

**Author(s):** Miedl, Stephan F; Buchel, Christian; Peters, Jan

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Psychology, University of Salzburg, Salzburg, Austria, 5020, stephan.miedl@sbg.ac.at

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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:** Impulsive behavior such as steep temporal discounting is a hallmark of addiction and is

associated with relapse. In pathological gamblers, discounting may be further increased by the presence of gambling-related cues in the environment, but the extent to which the gambling relatedness of task settings affects reward responses in gambling addiction is debated. In the present study, human problem gamblers made choices between immediate rewards and individually tailored larger-but-later rewards while visual gambling-related scenes were presented in the background. N=17 participants were scanned using fMRI,

whereas N = 5 additional participants completed a behavioral version of the task.

Postscan craving ratings were acquired for each image, and behavioral and neuroimaging data were analyzed separately for high- and low-craving trials (median split analysis). Discounting was steeper for high versus low craving trials. Neuroimaging revealed a positive correlation with model-based subjective value in midbrain and striatum in low-craving trials that was reversed in high-craving trials. These findings reveal a modulation of striatal reward responses in gamblers by addiction-related cues, and highlight a potentially important mechanism that may contribute to relapse. Cue-induced changes in striatal delayed reward signals may lead to increased discounting of future rewards, which might in turn affect the likelihood of relapse. (PsycINFO Database Record

(c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Impulsiveness

\*Pathological Gambling

\*Functional Magnetic Resonance Imaging

Craving Cues Rewards

Source: PsycINFO

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

137. The course of diamorphine treatment under standard health care conditions in Germany-A 12-months analysis.

Original Title: Der Verlauf der Diamorphinbehandlung unter den Bedingungen der gesundheitlichen

Regelversorgung-eine 12-Monats-Analyse.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2014, vol./is. 60/1(43-53),

0939-5911 (Feb 2014)

Author(s): Verthein, Uwe; Kuhn, Silke; Schafer, Ingo

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Psychiatrie und Psychotherapie, Universitatsklinikums Hamburg-Eppendorf, Hamburg, Germany; Zentrum fur Interdisziplinare Suchtforschung, Universitat Hamburg (ZIS), Klinik fur Psychiatrie und Psychotherapie, Universitatsklinikums Hamburg-Eppendorf, Hamburg, Germany; Zentrum fur Interdisziplinare Suchtforschung, Universitat Hamburg

(ZIS), Klinik fur Psychiatrie und Psychotherapie, Universitatsklinikums

Hamburg-Eppendorf, Hamburg, Germany

Language: German

**Abstract:** Background: Subsequent to the German randomized trial of heroin-assisted treatment in

2007 a quality assurance project was initiated by the Centre for Interdisciplinary

Addiction Research of Hamburg University. Thus, long-term monitoring of diamorphine treatment was made possible. Objective: Patients' status and one-year-development of the new patients who started diamorphine treatment after the German model project will be analyzed. Changes during the first year can be compared with the results of the former heroin trial. Methods: At treatment admission and after every six months the patients' situation regarding health, social situation and substance use was documented on standardized forms by the doctors. The description of patients' status was based on the last documentation in 2011. In the longitudinal analysis data from start of treatment and one-year assessment were compared and tested for statistical significance. Results: 341 diamorphine patients are documented in 2011, 205 (60.1 %) of whom started treatment under the new conditions after the German model project was finished. Most of the patients received their diamorphine dose twice a day The mean daily dose is 358 mg diamorphine for the "old" patients who are in treatment for more than eight years on average. The newly admitted patients who are in treatment for a year and a half on average get a mean daily dose of 432 mg. 3.6 % of the patients are HIV-positive, 75.0 % are infected with hepatitis C. One quarter suffers from depressive disorders. The majority of the patients are living in stable conditions, and one quarter is working regularly or having a job. Offences are committed by only 6.7 % of the patients. 5.1 % used street heroin and 22.4 % cocaine during the past 30 days. With respect to health, social situation and drug use significant improvements are found during the first year of diamorphine treatment. Conclusions: Heroin-assisted treatment under standard health care conditions is as effective as under the conditions of a randomized clinical trial. The current situation of the "old" patients who participated in the trial is slightly better than among the new patients. This indicates that major changes and developments under diamorphine treatment needs time to occur. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Drug Therapy

\*Health Care Delivery

\*Heroin

Source: PsycINFO

### 138. Practical application of mindfulness in addition treatment-The case of MBRP and DBT-S.

Original Title: Praktische Anwendung von Achtsamkeit in der Suchttherapie am Beispiel des MBRP

Programms und der DBT-Sucht.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2014, vol./is. 60/1(29-36),

0939-5911 (Feb 2014)

Author(s): Mundle, Gotz; Bowen, Sarah; Heinz, Andreas; Kienast, Thorsten

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University of Washington, Center for the Study of Health and Risk Behaviors (CSHRB), Seattle, WA, US; Klinik fur Psychiatrie und Psychotherapie, Universitatsmedizin, Berlin, Germany; Klinik fur Psychiatrie und Psychotherapie, Universitatsmedizin, Berlin,

Germany

Language: German

Abstract: Background: Mindfulness Relapse Prevention" (MBRP) and Dialectic Behavioral

Therapy for substance abuse (DBT-S) both focus on mindfulness skills for the treatment of patients with substance abuse and addiction. Mindfulness is shortly explained as a

focused, nonjudgmental observing, describing and participating technique helping to improve internal or external awareness. Giving up a judgmental approach mindfulness improves effective relapse prevention and increases the likelihood for a more flexible problem solving. Whereas substance consumption decreases awareness, mindfulness increases awareness and thus it may offer a more objective view on selected topics of patients live as well as a more effective approach to handle craving for substances. Aim: This article gives a short introduction to MBSR and DBT-S. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Addiction

\*Drug Abuse \*Relapse Prevention

\*Mindfulness

\*Dialectical Behavior Therapy

Source: PsycINFO

### 139. The neuronal foundations of meditation and mindfulness.

Original Title: Die neuronale Basis von Meditation und Achtsamkeit.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2014, vol./is. 60/1(21-28),

0939-5911 (Feb 2014)

**Author(s):** Esch, Tobias

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**Institution:** Hochschule Coburg, Coburg, Germany

Language: German

**Abstract:** Aim: Describing neurobiological effects and mechanisms of mindfulness and meditation

(current state). Methods: Comprehensive, selective literature search in international and national databases. Results: Neurobiological effects of meditation and mindfulness can be detected throughout the brain by functional changes, but also via analysis of structural alterations in gray and white matter. These changes have been demonstrated particularly in areas and networks that are linked to attention and memory, interception and sensory processing, as well as self- and auto-regulation (including control of stress and emotions). Neuronal mechanisms of mindfulness can thus be divided, systemically into four areas: attention regulation, body awareness, emotion regulation, and self-awareness. On the neuroendocrine level, involvement of dopamine and melatonin (increase), serotonin (modulation) and Cortisol, norepinephrine (decrease) have been shown. Conclusions: Results are interesting for medicine and health care, particularly against the background of therapeutic behavior and life-style modifications, in stress management, and,

especially, in the treatment of addiction. (PsycINFO Database Record (c) 2014 APA, all

rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Meditation

\*Therapeutic Processes

\*Mindfulness Neurobiology White Matter

**Source:** PsycINFO

# 140. Mindfulness-Origin, practice and conception.

Original Title: Was ist Achtsamkeit? Herkunft, Praxis und Konzeption.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2014, vol./is. 60/1(13-19),

0939-5911 (Feb 2014)

Author(s): Schmidt, Stefan

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Psychosomatische Medizin und Psychotherapie, Universitatsklinikum Freiburg, Freiburg,

Germany

Language: German

**Abstract:** Content: Starting from its recent popularity the notion of mindfulness is explained with

respect to its historic origin as well as with respect to its application and practice within our modern culture. It is shown that mindfulness is intimately tied with direct experience

and as such is in contradiction with a static scientific definition of 'mindfulness'. Furthermore the understanding of mindfulness also changes to some degree in dependence of the specific context it is applied in. Thereby, the crucial issue is the motivation for the practice of mindfulness. In the early Buddhist context, where mindfulness is mentioned first, the motivation is directed towards spiritual growth and self-transformation. In our modern western society we find next to spiritual motives also secular ones and mindfulness is practiced within a wide range of different areas with large variation of goals and motives to do so. Often intentions are towards wellbeing, relaxation and self-exploration. But of course mindfulness is also applied within clinical and

relapse prevention was developed. Conclusion: Overall the recent popularity of mindfulness is interpreted as a collective process of self-regulation of our culture which is facing increasing functionalization and social acceleration. (PsycINFO Database Record

educational contexts. Especially in the treatment of addiction a specific program for

(c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Motivation

\*Practice

\*Self Regulation
\*Well Being
\*Mindfulness
Modernization

Source: PsycINFO

141. Mindfulness-based psychotherapy-Opportunities and limits of the third generation of behavior therapy.

Original Title: Achtsamkeitsbasierte Psychotherapie-Chancen und Grenzen der dritten Generation der

Verhaltenstherapie.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2014, vol./is. 60/1(7-12),

0939-5911 (Feb 2014)

Author(s): Heidenreich, Thomas; Michalak, Johannes

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**Institution:** Fakultat Soziale Arbeit, Gesundheit und Pflege, Hochschule Esslingen, Esslingen,

Germany; Universitat Hildesheim, Hildesheim, Germany

Language: German

**Abstract:** Aim: The paper presents important approaches of mindfulness-based psychotherapy and

introduces the concept of the "third wave" of behavior therapy. Content: Approaches that can be counted as "third wave" (Mindfulness-Based Stress Reduction, Mindfulness-Based Cognitive Therapy, Acceptance and Commitment Therapy, Dialectical Behavior Therapy) as well as current results pertaining to the efficacy of these approaches are presented. Opportunities and limitations of mindfulness-based approaches are discussed. Conclusions: Mindfulness-based interventions open up interesting perspectives for psychotherapy in general and for the treatment of substance use disorders. Possible dangers in introducing these methods into psychotherapy should be taken into account. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Drug Abuse

\*Psychotherapy \*Mindfulness

\*Dialectical Behavior Therapy

**Source:** PsycINFO

142. Integrating addiction and mental health treatment within a national addiction treatment system: Using multiple statistical methods to analyze client and interviewer assessment of co-occurring mental health problems.

Citation: Nordic Studies on Alcohol and Drugs, February 2014, vol./is. 31/1(59-79), 1458-6126

(Feb 2014)

Author(s): Lundgren, Lena; Wilkey, Catriona; Chassler, Deborah; Sandlund, Mikael; Armelius,

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University, Umea, Sweden; Department of Psychology, Umea University, Umea, Sweden;

Field Research and Development Unit (UFFE), Umea, Sweden

Language: English

**Abstract:** Aims: For a Swedish national sample of 12,833 individuals assessed for a substance use

disorder (SUD) (2002-2008) in the Swedish welfare system, client self-report and clinical staff Addiction Severity Index (ASI) assessment data were used to assess mental health problem severity and needs. Methods: Analysis of client self-report data using regression methods identified demographic characteristics associated with reporting significant mental health problems. Clinical staff assessment data from the ASI Interviewer Severity Rating (ISR) score were used to develop a K-means cluster analysis with three client cluster profiles: Narcotics (n = 4795); Alcohol (n = 4380); and Alcohol and Psychiatric Problems (n = 3658). Chi-square and one-way ANOVA analyses identified self-reported mental health problems for these clusters. Results: 44% of clients had a history of using outpatient mental health treatment, 45% reported current mental health symptoms, and 19% reported significant mental health problems. Women were 1.6 times more likely to report significant mental health problems than men. Staff assessed that 74.8% of clients had current mental health problems and that 13.9% had significant mental health

problems. Client and staff results were congruent in identifying that clients in the Alcohol

profile were less likely (5%) to report having significant mental health problems compared to the other two profiles (30% each). Conclusions: About 19% of clients with SUDs reported significant mental health problems, need integrated addiction and mental health treatment, and these clients are clustered in two population groups. An additional 25% of the addiction treatment population report current mental health symptoms and have at some point used mental health treatment. This national level assessment of the extent and severity of co-occurring disorders can inform decisions made regarding policy

shifts towards an integrated system and the needs of clients with co-occurring disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Comorbidity

\*Drug Addiction
\*Drug Rehabilitation
\*Mental Disorders
\*Mental Health

Clients Interviewers Measurement

Source: PsycINFO

Full Text: Available from *ProQuest* in *Nordic Studies on Alcohol and Drugs*; Note: ; Collection

notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop

down list of institutions.

143. Capabilities for handling complex substance abuse problems and its relationship to the treatment system: Using the DDCAT instrument to explore local treatment systems in Finland.

Citation: Nordic Studies on Alcohol and Drugs, February 2014, vol./is. 31/1(45-58), 1458-6126

(Feb 2014)

Author(s): Tammi, Tuukka; Stenius, Kerstin

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Language: English

**Abstract:** Background: Mental health problems in Finland have been the responsibility of the health

care, and substance abuse problems have been handled within social care. In 2009, a national reform aiming at integrating mental health and substance abuse treatment systems (SATS) was launched. The critics of integration were concerned that it implies a medicalization and a narrowing of the social care goals. Aim: This article analyses to what extent integration of mental health and SATS affect the capability to treat co-occurring substance abuse and mental health problems. A secondary aim is to assess the utility of the DDCAT (Dual Diagnosis Capability in Addiction Treatment) instrument in a Finnish context. Data: The study is based on group interviews, using DDCAT, in six Finnish municipalities, three with integrated and three with separate mental health care

in a Finnish context. Data: The study is based on group interviews, using DDCAT, in six Finnish municipalities, three with integrated and three with separate mental health care and SATS. The assessment pertains to the main outpatient unit in the city. Results: The dual diagnosis treatment capability did not depend on the system-level integration. Two municipalities where SATS was administratively separate from mental health care were able to achieve high dual diagnosis capability ratings while in one municipality with system level integration this capability was not very high. The DDCAT instrument puts an emphasis on medical staff and competence. Conclusions: Strong, separate local SATS may adapt to the integration demands or needs by strengthening their psychiatric competence. This solution can result in treatment that is equally competent in treating mental health and substance abuse problems as integrated systems. The DDCAT

instrument can be useful in a Finnish context to measure medical competence to handle dual diagnoses, irrespective of system solutions. For a balanced measurement, the instrument should be complemented with a section mapping competence to handle co-occurring social problems. (PsycINFO Database Record (c) 2014 APA, all rights

reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal

Subject Headings: \*Drug Abuse

\*Drug Addiction

\*Drug Rehabilitation \*Dual Diagnosis

\*Therapeutic Processes

Source: PsycINFO

**Full Text:** Available from *ProQuest* in *Nordic Studies on Alcohol and Drugs*; Note: ; Collection

notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop

down list of institutions.

144. Co-occurrence of substance use disorders with other psychiatric disorders: Implications for treatment services.

Citation: Nordic Studies on Alcohol and Drugs, February 2014, vol./is. 31/1(5-25), 1458-6126 (Feb

2014)

Author(s): Morisano, Dominique; Babor, Thomas F; Robaina, Katherine A

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of Medicine, Farmington, CT, US

Language: English

**Abstract:** Introduction: This paper critically evaluates the literature on the co-occurrence of

substance-use disorders (SUDs) with other psychiatric conditions. Our review considers the variety of different associations between the two, and suggests the implications of the

literature for the design of treatment services that address both types of disorders. Methods: A narrative review of research and theory was conducted, covering

Methods: A narrative review of research and theory was conducted, covering epidemiology of co-occurring psychiatric disorders worldwide, mechanisms underlying co-occurrence, and treatment models. Results: Epidemiological research has documented a high prevalence of co-occurring disorders in both clinical samples and the general population, although the literature is based primarily on studies in high-income countries and some of the overlap might be due to the co-occurrence of milder forms of both types of disorders. Consistent with what has been reported in other reviews, we conclude that clients with co-occurring disorders tend to have a more severe course of illness, more severe health and social consequences, more difficulties in treatment, and worse treatment outcomes than clients with a single disorder; we address the implications of these findings

outcomes than clients with a single disorder; we address the implications of these findings for the design of treatment services. Conclusions: Much of the evidence shows that separately, treatments for both SUD and other psychiatric disorders are effective in reducing substance use and in improving behavioral, familial, and psychosocial outcomes. The evidence further suggests that these outcomes might be improved when treatment modalities are offered in combination within an integrated treatment plan that

simultaneously addresses substance abuse and psychiatric problems. It is concluded that there is potentially more to be gained from taking a public health perspective and working on efforts to implement existing evidence-based practices at the systems level, than from

the current tendency to look for ever more powerful individual-level interventions at the clinical level. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Comorbidity

\*Drug Abuse

\*Drug Rehabilitation
\*Mental Disorders
\*Mental Health Services

**Source:** PsycINFO

**Full Text:** Available from *ProQuest* in *Nordic Studies on Alcohol and Drugs*; Note: ; Collection

notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop

down list of institutions.

145. Addiction potential of phentermine prescribed during long-term treatment of obesity.

Citation: International Journal of Obesity, February 2014, vol./is. 38/2(292-298),

0307-0565;1476-5497 (Feb 2014)

**Author(s):** Hendricks, E. J; Srisurapanont, M; Schmidt, S. L; Haggard, M; Souter, S; Mitchell, C. L;

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System, Baton Rouge, LA, US

Language: English

**Abstract:** Objective: To investigate if phentermine treatment induces phentermine abuse,

psychological dependence (addiction) or phentermine drug craving in overweight, obese and weight loss maintenance patients. To investigate whether amphetamine-like withdrawal occurs after abrupt cessation of long-term phentermine treatment. Design: Clinical intervention trial with interruption of phentermine treatment in long-term patients. Subjects: 269 obese, overweight or formerly obese subjects (age: 20-88 years, BMI: 21-74 kg m-2) treated with phentermine long-term (LTP, N = 117), 1.1-21.1 years, or short-term (ATP, N = 152), 4-22 days, with phentermine doses of 18.75-112.5 (LTP) and 15-93.75 (ATP) mg per day. Measurements: Module K of the Mini International Neuropsychiatric Interview modified for phentermine (MINI-SUD), Severity of Dependence Scale (SDS), 45-item Cocaine Craving Questionnaire-NOW (CCQ-NOW) modified for phentermine (PCQ-NOW), and Amphetamine Withdrawal Questionnaire (AWQ) modified for phentermine (PWQ). Results: MINI-SUD interviews were negative

for phentermine abuse or psychological dependence in all LTP patients. SDS examination scores were low for all LTP and ATP patients, indicating they were not psychologically dependent upon phentermine. PCQ-NOW scores were low for all LTP and ATP patients, indicating neither short-term nor long-term phentermine treatment had induced phentermine craving. Other than an increase in hunger or eating, amphetamine-like withdrawal symptoms did not occur upon abrupt phentermine cessation as measured by sequential PWQ scores. Conclusions: Phentermine abuse or psychological dependence (addiction) does not occur in patients treated with phentermine for obesity. Phentermine treatment does not induce phentermine drug craving, a hallmark sign of addiction. Amphetamine-like withdrawal does not occur upon abrupt treatment cessation even at doses much higher than commonly recommended and after treatment durations of up to 21 years. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal

abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR:

2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Addiction

\*Drug Therapy
\*Side Effects (Drug)

\*Treatment Obesity

**Source:** PsycINFO

146. Posttraumatic stress disorder and alcohol dependence: Individual and combined associations with social network problems.

Citation: Journal of Anxiety Disorders, January 2014, vol./is. 28/1(67-74), 0887-6185 (Jan 2014)

Author(s): Dutton, Courtney E; Adams, Thomas; Bujarski, Sarah; Badour, Christal L; Feldner,

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Language: English

**Abstract:** People with either posttraumatic stress disorder (PTSD) or alcohol dependence (AD) are

apt to report problems in their social networks, including low perceived support and elevated conflict. However, little research has examined social networks among people with comorbid PTSD/AD despite evidence suggesting these two conditions commonly co-occur and are linked to particularly severe problems. To test the hypothesis that people with comorbid PTSD/AD experience particularly elevated social network problems. individuals with lifetime diagnoses of PTSD, AD, comorbid PTSD/AD, or no lifetime history of Axis I psychopathology in the National Comorbidity Survey-Replication were compared on four dimensions of social networks: (1) Closeness. (2) Conflict. (3) Family Support, and (4) Apprehension. Persons with PTSD, AD, or comorbid PTSD/AD endorsed more problems with the Conflict, Family Support, and Apprehension factors compared to people with no history of Axis I psychopathology. Moreover, individuals with comorbid PTSD/AD endorsed greater Apprehension and significantly less Family Support compared to the other three groups. Results suggest people with comorbid PTSD/AD experience increased problems with their family as well as greater concerns about enlisting social support than even people with PTSD or AD alone. Treatments for people suffering from comorbid PTSD/AD should consider assessing for and possibly targeting family support and apprehension about being close to others. (PsycINFO

Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Elsevier Ltd; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Posttraumatic Stress Disorder

\*Social Networks

Conflict

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Journal of Anxiety Disorders* 

147. Comorbidity of social anxiety disorder and antisocial personality disorder in the National Epidemiological Survey on Alcohol and Related Conditions (NESARC).

**Citation:** Journal of Anxiety Disorders, January 2014, vol./is. 28/1(57-66), 0887-6185 (Jan 2014)

Author(s): Galbraith, Todd; Heimberg, Richard G; Wang, Shuai; Schneier, Franklin R; Blanco,

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**Language:** English

**Abstract:** Social anxiety disorder (SAD) and antisocial personality disorder (ASPD) are not often

thought of as being comorbid. However, recent research suggests the existence of a SAD subtype with characteristics atypical of SAD but common to ASPD. Thus, we explored two competing hypotheses: (1) SAD and ASPD represent opposite ends of a single dimension, or (2) SAD and ASPD exist on two separate dimensions that may be positively correlated. Data were obtained from the National Epidemiological Survey on Alcohol and Related Conditions. SAD-ASPD was related to greater impairment and psychiatric comorbidity than either disorder alone. The SAD-ASPD group was also more

likely to seek treatment for their SAD symptoms and to drink before/during antisocial acts than the SAD only group. The presence of SAD for individuals with ASPD (and vice versa) does not appear to provide any "protective benefits." SAD and ASPD appear to be two separate but correlated disorders. (PsycINFO Database Record (c) 2014 APA, all

rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Elsevier Ltd; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Antisocial Personality Disorder

\*Anxiety Disorders
\*Comorbidity
\*Social Anxiety

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Journal of Anxiety Disorders* 

148. Scurvy in an alcohol-dependent patient with a severely unbalanced diet.

Citation: Psychiatry and Clinical Neurosciences, March 2014, vol./is. 68/3(242-243),

1323-1316;1440-1819 (Mar 2014)

Author(s): Takeshima, Masahiro; Echizenya, Masaru; Inomata, Yoshiyuki; Shimizu, Tetsuo

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University Graduate School of Medicine, Akita, Japan

Language: English

**Abstract:** Presents a case report of a 45-year-old man with alcohol dependency. He presented to the

emergency outpatient clinic with chief complaints of easy fatigability, loss of appetite, and pain in bilateral lower legs. He had tended to drink too much alcohol since his twenties. Although he had alcoholic liver injury, he would not stop alcohol ingestion. For the past several years, he had been drinking approximately 1500 mL of beer and 350 mL of whisky per day. He had a severely unbalanced diet. He ate only ready-made meals that contained some meats, instant food from convenience stores, and seldom any fresh vegetables or fruits. He had easy fatigability and loss of appetite from 3 weeks before presentation to the clinic. He gradually became unable to consume anything but water. At the same time, he developed pain in bilateral lower legs and had difficulty in ambulation. As alcohol-dependent patients, such as the patient in this study, often have an unbalanced diet for a long time and alcohol inhibits vitamin C absorption, it is necessary to be mindful of scurvy in alcohol-dependent patients. (PsycINFO Database Record (c) 2014 APA, all

rights reserved)

**Country of Publication:** HOLDER: The Authors, Psychiatry and Clinical Neurosciences-Japanese Society of

Psychiatry and Neurology; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Alcoholism

\*Case Report

\*Diets

\*Drug Dependency

\*Vitamin Deficiency Disorders

Alcohols

**Source:** PsycINFO

Full Text: Available from Wiley in Psychiatry and Clinical Neurosciences

149. Internet abusers associate with a depressive state but not a depressive trait.

Citation: Psychiatry and Clinical Neurosciences, March 2014, vol./is. 68/3(197-205),

1323-1316;1440-1819 (Mar 2014)

Author(s): Huang, Andrew Chih Wei; Chen, Huai-En; Wang, Ying-Chou; Wang, Le-Min

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Language: English

**Abstract:** Aim: The present study investigated three issues: (i) whether Internet abusers display a

depressive state without a depressive trait; (ii) which symptoms are shared between Internet abuse and depression; and (iii) which personality characteristics were shown in Internet abusers. Methods: Ninety-nine male and 58 female participants aged 18-24 years were screened with the Chen Internet Addiction Scale. After screening, subjects were separated into the high- (n = 73) and low-risk (n = 84) Internet abuser groups. Participants were respectively administered the Chinese version of the Beck Depression Inventory-II to assess a depressive state and the Minnesota Multiphasic Personality Inventory-2 to assess a depressive trait. Results: The present results showed that high-risk Internet abusers exhibited a stronger depressive state than low-risk Internet abusers in the Beck Depression Inventory-II. However, high-risk Internet abusers did not show a depressive trait in the Minnesota Multiphasic Personality Inventory-2 compared to low-risk Internet abusers. Therefore, high-risk Internet abuse participants exhibited a depressive state without a depressive trait. Conclusions: In a comparison of the symptoms of depression and Internet abuse, it was found that high-risk Internet abuse participants shared some common behavioral mechanisms with depression, including the psychiatric symptoms of loss of interest, aggressive behavior, depressive mood, and guilty feelings. High-risk Internet abuse participants may be more susceptible to a temporal depressive state but not a permanent depressive trait. The present findings have clinical implications for the prevention and treatment of Internet abuse. (PsycINFO Database Record (c) 2014 APA,

all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors, Psychiatry and Clinical Neurosciences-Japanese Society of

Psychiatry and Neurology; YEAR: 2013

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** \*Internet Addiction

\*Major Depression \*Personality Traits \*Risk Factors Symptoms

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in *Psychiatry and Clinical Neurosciences* 

150. Patient perspectives of an integrated program of medical care and substance use treatment.

**Citation:** AIDS Patient Care and STDs, February 2014, vol./is. 28/2(71-81), 1087-2914 (Feb 2014)

Author(s): Drainoni, Mari-Lynn; Farrell, Caitlin; Sorensen-Alawad, Amy; Palmisano, Joseph N;

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**Language:** English

**Abstract:** The benefits of integrating primary care and substance use disorder treatment are well

known, yet true integration is difficult. We developed and evaluated a team-based model of integrated care within the primary care setting for HIV-infected substance users and substance users at risk for contracting HIV. Qualitative data were gathered via focus groups and satisfaction surveys to assess patients' views of the program, evaluate key elements for success, and provide recommendations for other programs. Key themes related to preferences for the convenience and efficiency of integrated care; support for a team-based model of care; a feeling that the program requirements offered needed structure; the importance of counseling and education; and how provision of concrete services improved overall well-being and quality of life. For patients who received buprenorphine/naloxone for opioid dependence, this was viewed as a major benefit. Our results support other studies that theorize integrated care could be of significant value for hard-to-reach populations and indicate that having a clinical team dedicated to providing substance use disorder treatment, HIV risk reduction, and case management services integrated into primary care clinics has the potential to greatly enhance the ability to serve a challenging population with unmet treatment needs. (PsycINFO Database Record (c)

2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Mary Ann Liebert, Inc.

Publication Type: Journal; Peer Reviewed Journal

**Subject Headings:** \*Client Attitudes

\*Drug Abuse

\*Integrated Services
\*Primary Health Care

\*Treatment

**Source:** PsycINFO