

Search Results

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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. Effects of a 3-hour sleep delay on sleep homeostasis in alcohol dependent adults.

- Citation:** Sleep: Journal of Sleep and Sleep Disorders Research, February 2012, vol./is. 35/2(273-278), 0161-8105;1550-9109 (Feb 1, 2012)
- Author(s):** Armitage, Roseanne; Hoffmann, Robert; Conroy, Deirdre A; Arnedt, J. Todd; Brower, Kirk J
- Correspondence Address:** Armitage, Roseanne: University of Michigan, Department of Psychiatry, Sleep & Chronophysiology Laboratory, 4250 Plymouth Rd, SPC 5740, Ann Arbor, MI, US, 48109-2700, rosearmi@umich.edu
- Institution:** Armitage, Roseanne: University of Michigan, Ann Arbor, MI; Hoffmann, Robert: University of Michigan, Ann Arbor, MI; Conroy, Deirdre A.: University of Michigan, Ann Arbor, MI; Arnedt, J. Todd: University of Michigan, Ann Arbor, MI; Brower, Kirk J.: University of Michigan, Ann Arbor, MI
- Language:** English
- Abstract:** Objectives: This study evaluated slow wave activity homeostatic response to a mild sleep challenge in alcohol-dependent adults compared to healthy controls. Design: Participants maintained a 23:00-06:00 schedule for 5 days verified by actigraphy and diary, followed by 3 nights in the lab: adaptation, baseline, and a sleep delay night with an 02:00-09:00 schedule. Setting: Sleep & Chronophysiology laboratory. Participants: 48 alcohol-dependent adults (39 men, 9 women) who were abstinent for at least 3 weeks and 16 healthy control adults (13 men, 3 women), 21-55 years of age participated in study. Interventions: N/A. Measurements and Results: Slow wave EEG activity (SWA) in consecutive NREM periods was compared between baseline and sleep delay nights and between AD and HC groups, using age and sex as statistical covariates. The AD group showed a blunted SWA response to sleep delay with significantly lower SWA power than the HC group. Exponential regression analyses confirmed lower asymptotic SWA with a slower decay rate over NREM sleep time in the AD group. Results were similar for raw SWA and % SWA on the delay night expressed relative to baseline SWA. Conclusions: Alcohol dependence is associated with impaired SWA regulation and a blunted response to a mild homeostatic sleep challenge. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** *Alcoholism
*Homeostasis
*Sleep
- Source:** PsycINFO
- Full Text:** Available in *fulltext* at [National Library of Medicine](#)

2. A systematic review of family-based interventions targeting alcohol misuse and their potential to reduce alcohol-related harm in indigenous communities.

- Citation:** Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(477-488), 1937-1888;1938-4114 (May 2012)
- Author(s):** Calabria, Bianca; Clifford, Anton; Shakeshaft, Anthony P; Doran, Christopher M
- Correspondence Address:** Calabria, Bianca: National Drug and Alcohol Research Centre, Building R3, 22-32 King Street, Randwick, NSW, Australia, 2031, b.calabria@unsw.edu.au
- Institution:** Calabria, Bianca: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW; Clifford, Anton: Queensland Alcohol and Drug Research and Education Centre, School of Population Health, University of Queensland, Brisbane, QLD; Shakeshaft, Anthony P.: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW; Doran, Christopher M.: Hunter Medical Research Centre, Newcastle, NSW
- Language:** English

Abstract: Objective: Alcohol misuse is a major risk factor for harm in indigenous communities. The indigenous family unit is often the setting for, and is most adversely affected by, alcohol-related harm. Therefore, family-based alcohol interventions offer great potential to reduce alcohol-related harm in indigenous communities. This systematic review aims to identify peer-reviewed published evaluations of family-based alcohol interventions, critique the methodological quality of those studies, describe their intervention characteristics, and identify which interventions appear most promising to reduce alcohol-related harm in indigenous communities. Method: Eleven electronic databases were searched. The reference lists of reviews of family-based approaches focused on alcohol interventions were hand-searched for additional relevant studies not identified by the electronic database search. Results: Initially, 1,369 studies were identified, of which 21% (n = 142) were classified as intervention studies. Nineteen intervention studies were family-based alcohol interventions. Eleven of these studies included family members in the treatment of problem drinkers, and eight studies specifically targeted family members of problem drinkers. Methodological quality of studies varied, particularly in relation to study design, including confounding variables in the analyses, and follow-up rates. Conclusions: The evidence for the effectiveness of family-based alcohol interventions is less than optimal, although the reviewed studies did show improved outcomes. Given the important role of family in indigenous communities, there is merit in exploring family-based approaches to reduce alcohol-related harms. Tailored family-based approaches should be developed that include direct consultation with targeted indigenous communities. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Rehabilitation](#)
[*Alcoholism](#)
[*Family Intervention](#)
[*Indigenous Populations](#)
[*Risk Factors](#)

Source: PsycINFO

3. Intimate partner violence and patterns of alcohol abuse and dependence criteria among women: A latent class analysis.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(351-360), 1937-1888;1938-4114 (May 2012)

Author(s): La Flair, Lareina N; Bradshaw, Catherine P; Storr, Carla L; Green, Kerry M; Alvanzo, Anika A. H; Crum, Rosa M

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Institution: La Flair, Lareina N.: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD; Bradshaw, Catherine P.: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD; Storr, Carla L.: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD; Green, Kerry M.: Department of Behavioral and Community Health, University of Maryland School of Public Health, College Park, MD; Alvanzo, Anika A. H.: Division of General Internal Medicine, Johns Hopkins University School of Medicine, Baltimore, MD; Crum, Rosa M.: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD

Language: English

Abstract: Objective: Intimate partner violence (IPV) is a major public health issue, yet little is known about the association between IPV victimization and problem drinking among women. Study objectives were to (a) identify subtypes of problem drinking among women according to abuse and dependence criteria from the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV); (b) examine the association between recent IPV and the problem drinking classes; and (c) evaluate major depressive disorder (MDD) as a mediator of the IPV-alcohol relationship. Method: Data come from a

cohort of 11,782 female current drinkers participating in Wave 2 (2004-2005) of the National Epidemiologic Survey on Alcohol and Related Conditions. Latent class analysis was used to group participants into problem drinking classes according to 11 DSM-IV abuse and dependence criteria. The IPV measure was derived from six questions regarding abusive behaviors perpetrated by a romantic partner in the past year. Past-year MDD was assessed according to DSM-IV criteria. Latent class regression was used to test the association between drinking class and IPV. Results: Three classes of problem drinkers were identified: Severe (Class 1: 1.9%; n = 224), moderate (Class 2: 14.2%; n = 1,676), and nonsymptomatic (Class 3: 83.9%; n = 9,882). Past-year IPV was associated with severe and moderate classes (severe: adjusted odds ratio [aOR] = 5.70, 95% CI [3.70, 8.77]; moderate: aOR = 1.92, 95% CI [1.43, 2.57]). Past-year MDD was a possible mediator of the IPV-drinking class relationship. Conclusions: Results indicate a strong association between recent IPV and problem drinking class membership. This study offers preliminary evidence that programs aimed at preventing problem drinking among women should take IPV and MDD into consideration. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Alcoholism](#)
[*Intimate Partner Violence](#)
[*Victimization](#)
[Human Females](#)
[Public Health](#)

Source: PsycINFO

4. The utility of mentoring homeless adolescents: A pilot study.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(350-358), 0095-2990;1097-9891 (Jul 2012)

Author(s): Bartle-Haring, Suzanne; Slesnick, Natasha; Collins, Jennifer; Erdem, Gizem; Buettner, Cynthia

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Language: English

Abstract: Background: Despite the intuitive appeal and popularity of mentoring programs, mentoring has shown only limited success for positively impacting children's psychosocial functioning. Furthermore, we were not able to identify a study that examined the potential utility of mentoring for homeless adolescents. Objective: The purpose of this pilot study was to examine the impact of mentoring among a group of homeless adolescents who were also receiving substance abuse treatment. Methods: This pilot study examined the impact of mentoring among homeless adolescents (n = 90) between the ages of 14 and 20 years who also received substance abuse treatment. A longitudinal design was used in which adolescents were assessed at baseline, 3 months, and following the completion of treatment at 6 months postbaseline. Results: Findings showed that adolescents with a history of physical or sexual abuse attended more mentoring sessions. Also, mentoring in addition to treatment was associated with a decrease in problem consequences associated with substance use. However, more mentoring with fewer treatment sessions was associated with an increase in internalizing behaviors. Only these two outcomes were associated with mentoring. Conclusions and

Scientific Significance: While not providing resounding support for mentoring, this study suggests that examining the mentor/mentee relationship may be a fruitful line of future research given that significant variability among the mentor/mentee pairs was noted for some outcomes of interest. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Homeless](#)
[Mentor](#)

Source: PsycINFO

5. An examination of the food addiction construct in obese patients with binge eating disorder.

Citation: International Journal of Eating Disorders, July 2012, vol./is. 45/5(657-663), 0276-3478;1098-108X (Jul 2012)

Author(s): Gearhardt, Ashley N; White, Marney A; Masheb, Robin M; Morgan, Peter T; Crosby, Ross D; Grilo, Carlos M

Correspondence Address: Gearhardt, Ashley N.: Yale University, Department of Psychology, 2 Hillhouse Avenue, New Haven, CT, US, 06511, Ashley.gearhardt@yale.edu

Institution: Gearhardt, Ashley N.: Department of Psychology, Yale University, New Haven, CT; White, Marney A.: Department of Psychiatry, Yale University School of Medicine, New Haven, CT; Masheb, Robin M.: Department of Psychiatry, Yale University School of Medicine, New Haven, CT; Morgan, Peter T.: Department of Psychiatry, Yale University School of Medicine, New Haven, CT; Crosby, Ross D.: Department of Biomedical Statistics, Neuropsychiatric Research Institute, Fargo, ND; Grilo, Carlos M.: Department of Psychology, Yale University, New Haven, CT

Language: English

Abstract: Objective: This study examined the psychometric properties of the Yale food addiction scale (YFAS) in obese patients with binge eating disorder (BED) and explored its association with measures of eating disorder and associated psychopathology. Method: Eighty-one obese treatment-seeking BED patients were given the YFAS, structured interviews to assess psychiatric disorders and eating disorder psychopathology, and other pathology measures. Results: Confirmatory factor analysis revealed a one-factor solution with an excellent fit. Classification of "food addiction" was met by 57% of BED patients. Patients classified as meeting YFAS "food addiction" criteria had significantly higher levels of depression, negative affect, emotion dysregulation, eating disorder psychopathology, and lower self-esteem. YFAS scores were also significant predictors of binge eating frequency above and beyond other measures. Discussion: The subset of BED patients classified as having YFAS "food addiction" appear to represent a more disturbed variant characterized by greater eating disorder psychopathology and associated pathology. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Wiley Periodicals, Inc.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Obesity](#)
[*Psychometrics](#)
[*Test Reliability](#)
[*Test Validity](#)
[*Binge Eating Disorder](#)
[Addiction](#)
[Food](#)

Source: PsycINFO

6. An outcome and clinical research focus in an integrated care patient-centered medical home.

Citation:	Integrated care: Applying theory to practice., 2012(297-310) (2012)
Author(s):	Kessler, Rodger
Institution:	Kessler, Rodger: Collaborative Care Research Network, AAFP's National Research Network
Language:	English
Abstract:	(from the chapter) Collaborative or integrated primary care (referred to as integrated care [IC] in this chapter) is driven by bright people who are invested in resolving the historic mind-body split in health care. These professionals work in a variety of clinical settings, where they create and become involved in activities and projects in an effort to improve individual patient care that does not often translate to efficiencies for population-based approaches to health behavior counseling (Green, Cifuentes, Glasgow, & Stange, 2008). This chapter focuses on changes to the clinical, organizational, and financial worlds of mental health, substance abuse, and health behavior services as described by Peek (Patterson, Peek, Heinrich, Bischoff, & Scherger, 2002). Professionals who work in IC settings experience roles with more fluidity, where patients varied and overall health needs can be met in one place. Although IC is a wonderful development for health care delivery, it is rife with challenges. Currently, IC professionals' efforts are not carefully described, and their practice is infrequently built on evidence-based outcomes (Miller, Kessler, & Peek, 2011). In addition, lacking are common procedures for identifying patients' needs and how they might be assessed or treated. These shortcomings are not surprising, as there is no common language by which to describe define, measure, or capture information about IC practice. To illustrate, please operationally define integration, collaborative mental health, coordinated care, colocated care, behavioral medicine, or primary care behavioral health (PCBH). How are they the same or similar, and how do they differ? Without a clear and agreed-on language that can be used to evaluate effectiveness, compare practice efforts, or provide data, changes in a health care policy and financing system that has historically marginalized the efforts of IC professionals will not be supported. The individualization of integration efforts across practices is currently an obstacle to changing health care provision, policy, and financing to incorporate IC. There has been limited research into these deficiencies and how best to address them; the research that has been conducted has suffered from constraints. Some of the weaknesses of IC research to date include lack of a clear agenda, lack of single, disease-focused research, limited research funding, reliance on methodology that does not generalize and often excludes capturing results of the patients seen in IC settings, and funding for research that is conducted by people and organizations who are not aware of these issues (Kessler & Glasgow, 2011). Analysis of the existing gaps in IC research suggests that for IC to mature as a field, a focus on goals that would diminish current limitations is needed. The remainder of this chapter will elaborate on these limitations and give examples of potential solutions. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Publication Type:	Book; Edited Book
Subject Headings:	*Integrated Services Drug Abuse Health Behavior Mental Health Services Behavioral Medicine
Source:	PsycINFO

7. Treating patients with substance abuse issues in integrated care.

Citation:	Integrated care: Applying theory to practice., 2012(183-198) (2012)
Author(s):	Teater, Don; Teater, Martha
Institution:	Teater, Don: Mountaintop Healthcare, Waynesville, NC; Teater, Martha: Mountaintop Healthcare, Waynesville, NC

Language: English

Abstract: (from the chapter) The integrated care (IC) model is effective and practical in managing patients who abuse substances. The accounts of our experiences in an integrated primary care clinic will demonstrate the value of using IC to bring about successful patient outcomes. This chapter will focus on what we have learned through our shared involvement in a buprenorphine (Suboxone) treatment program for patients with opioid dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Drug Therapy](#)
[*Integrated Services](#)
[Opiates](#)

Source: PsycINFO

8. Assessment of craving to predict relapse in patients with substance abuse/dependence.

Citation: Advances in psychology research (Vol 88)., 2012(225-234), 1532-723X (2012)

Author(s): Ogai, Yasukazu; Chin, Fumiyuki; Ikeda, Kazutaka

Correspondence Address: Ogai, Yasukazu: Research Project for Addictive Substances, Tokyo Metropolitan Institute of Medical Science, 2-1-6 Kamikitazawa, Setagaya-ku, Tokyo, Japan, 156-8506, ogai-ys@igakuken.or.jp

Institution: Ogai, Yasukazu: Research Project for Addictive Substances, Tokyo Metropolitan Institute of Medical Science, Tokyo; Chin, Fumiyuki: Research Project for Addictive Substances, Tokyo Metropolitan Institute of Medical Science, Tokyo; Ikeda, Kazutaka: Research Project for Addictive Substances, Tokyo Metropolitan Institute of Medical Science, Tokyo

Language: English

Abstract: (from the chapter) Clinical experts in drug dependence therapy must grasp patients' levels of craving to predict their propensity to relapse. Although craving is considered to lead to relapse, the findings have been mixed in supporting this hypothesis. The lack of robust associations may be attributable to (i) the inconsistency in the definition of craving across studies, (ii) limitations in measuring craving and drug use, and (iii) mismatched timeframes and timing in the measurement of craving. This chapter reviews the following possible solutions for these problems, including (i) multidimensional measurement of an extended concept of craving, (ii) methodological techniques to avoid response bias (e.g., social cognitive measurement), and (iii) real-time measurement of craving with Ecologically Momentary Assessment. Additionally, we developed the Relapse Risk Index (RRI), which is a set of assessment systems for predicting relapse. The use of conceptually and methodologically based assessments will lead to a more precise understanding of the directional relationship between a patient's level of craving and risk of relapse. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Craving](#)
[*Drug Abuse](#)
[*Psychological Assessment](#)
[*Relapse \(Disorders\)](#)
[*Test Construction](#)
[Alcoholism](#)
[At Risk Populations](#)
[Drug Dependency](#)

Source: PsycINFO

9. Sensitivity to monetary reward is most severely compromised in recently abstaining cocaine addicted individuals: A cross-sectional erp study.

Citation: Psychiatry Research: Neuroimaging, July 2012(No Pagination Specified), 0925-4927 (Jul 26, 2012)

Author(s): Parvaz, Muhammad A; Maloney, Thomas; Moeller, Scott J; Woicik, Patricia A; Alia-Klein, Nelly; Telang, Frank; Wang, Gene-Jack; Squires, Nancy K; Volkow, Nora D; Goldstein, Rita Z

Abstract: Recent studies suggest that drug-addicted individuals have a dampened cortical response to non-drug rewards. However, it remains unclear whether recency of drug use impacts this impairment. Therefore, in this event-related potential study, recency of cocaine use was objectively determined by measuring cocaine in urine on study day. Thirty-five individuals with current cocaine use disorder [CUD: 21 testing positive (CUD+) and 14 testing negative (CUD-) for cocaine in urine] and 23 healthy controls completed a sustained attention task with graded monetary incentives (0, 1 and 45). Unlike in controls, in both CUD subgroups P300 amplitude was not modulated by the varying amounts of money and the CUD- showed the most severe impairment as documented by the lowest P300 amplitudes and task accuracy. Moreover, while recency of drug use was associated with better accuracy and higher P300 amplitudes, chronic drug use was associated with lower sensitivity to money. These results extend our previous findings of decreased sustained sensitivity to monetary reward in CUD+ to recently abstaining individuals, where level of impairment was most severe. Taken together, these results support the self-medication hypothesis, where CUD may be self-administering cocaine to avoid or compensate for underlying cognitive and emotional difficulties albeit with a long-term detrimental effect on sensitivity to non-drug reward. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

10. Shared and unique genetic contributions to attention deficit/hyperactivity disorder and substance use disorders: A pilot study of six candidate genes.

Citation: European Neuropsychopharmacology, July 2012(No Pagination Specified), 0924-977X (Jul 26, 2012)

Author(s): Carpentier, P.J; Arias Vasquez, A; Hoogman, M; Onnink, M; Kan, C.C; Kooij, J.J.S; Makkinje, R; Iskandar, S; Kiemenev, L.A; de Jong, C.A.J; Franke, B; Buitelaar, J.K

Abstract: The shared genetic basis of attention deficit/hyperactivity disorder (ADHD) and substance use disorders (SUDs) was explored by investigating the association of candidate risk factors in neurotransmitter genes with both disorders. One hundred seven methadone maintenance treatment patients, 36 having an ADHD diagnosis, 176 adult patients with ADHD without SUDs, and 500 healthy controls were genotyped for variants in the DRD4 (exon 3 VNTR), DRD5 (upstream VNTR), HTR1B (rs6296), DBH (rs2519152), COMT (rs4680; Val158Met), and OPRM1 (rs1799971; 118A>G) genes. Association with disease was tested using logistic regression models. This pilot study was adequately powered to detect larger genetic effects ($OR \geq 2$) of risk alleles with a low frequency. Compared to controls, ADHD patients (with and without SUDs) showed significantly increased frequency of the DBH (rs2519152: OR 1.73; CI 1.15-2.59; $P=0.008$) and the OPRM1 risk genotypes (rs1799971: OR 1.71; CI 1.17-2.50; $P=0.006$). The DBH risk genotype was associated with ADHD diagnosis, with the association strongest in the pure ADHD group. The OPRM1 risk genotype increased the risk for the combined ADHD and SUD phenotype. The present study strengthens the evidence for a shared genetic basis for ADHD and addiction. The association of OPRM1 with the ADHD and SUD combination could help to explain the contradictory results of previous studies. The power limitations of the study restrict the significance of these findings: replication in larger samples is warranted. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

11. Effect of quality chronic disease management for alcohol and drug dependence on addiction outcomes.

Citation: Journal of Substance Abuse Treatment, July 2012(No Pagination Specified), 0740-5472 (Jul 25, 2012)

Author(s): Kim, Theresa W; Saitz, Richard; Cheng, Debbie M; Winter, Michael R; Witas, Julie; Samet, Jeffrey H

Abstract: We examined the effect of the quality of primary care-based chronic disease management (CDM) for alcohol and/or other drug (AOD) dependence on addiction outcomes. We assessed quality using (1) a visit frequency based measure and (2) a self-reported assessment measuring alignment with the chronic care model. The visit frequency based measure had no significant association with addiction outcomes. The self-reported measure of care-when care was at a CDM clinic-was associated with lower drug addiction severity. The self-reported assessment of care from any healthcare source (CDM clinic or elsewhere) was associated with lower alcohol addiction severity and abstinence. These findings suggest that high quality CDM for AOD dependence may improve addiction outcomes. Quality measures based upon alignment with the chronic care model may better capture features of effective CDM care than a visit frequency measure. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

12. "and mostly they have a need for sleeping pills": Physicians' views on treatment of sleep disorders with drugs in nursing homes.

Citation: Journal of Aging Studies, July 2012(No Pagination Specified), 0890-4065 (Jul 23, 2012)

Author(s): Flick, Uwe; Garms-Homolova, Vjenka; Rohnsch, Gundula

Abstract: The percentage of nursing home residents treated with hypnotic medications is high, as many authors report, despite the fact that such medications are almost always associated with undesirable effects for old people. This article takes a closer look at nursing home physicians' views of prescriptions when treating sleep disorders of nursing home residents. How do physicians characterize the treatment strategy for residents suffering from sleep disorders? How do they balance the benefits and risks of the hypnotic medication? Under what circumstances do they accept negative consequences? To answer these questions, N=20 physicians (aged 36 to 68years) in 16 nursing homes in a German city were interviewed. The physicians were either employed by nursing homes or worked on a contract basis. Comparative categorization of the data produced a typology across cases. Three interpretative patterns concerning the use of drugs for treating sleep disorders were identified - "by request," "ambivalence," and "reflected prescription." Differences between them were determined by the significance of residents' wishes, neglect of risks, particularly that of addiction, and the attempt to balance benefits and disadvantages. The study showed deficits in professional management of sleep disorders in nursing homes. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

13. Pleasure seeking and the aspect of longing for an object in perversion. A neuropsychanalytical perspective.

Citation: American Journal of Psychotherapy, 2012, vol./is. 66/2(129-150), 0002-9564 (2012)

Author(s): Berner, Wolfgang; Briken, Peer

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Institution: Berner, Wolfgang: University Medical Center Hamburg-Eppendorf; Briken, Peer: University Medical Center Hamburg-Eppendorf

Language: English

Abstract: In modern psychiatric classifications the term paraphilia has replaced the term perversion by changing the scope of the definitions from avoided procreation to failures of relationship-aspects of sexuality. Contemporary psychoanalysts also seem less interested in pleasure seeking aspects, which were so important within original Freudian thought, and instead concentrate interpretation on hostility and the history of the representation of objects. This paper discusses the connection between distinct object representations in perversions and attachment theory and neurobiological representations. It will discuss the observation that the neglect of pleasure seeking in perversion often results in a failure to recognise the addiction-like aspects of perversion, which seem to be particularly relevant to modern psychiatric and psychological thinking. The SEEKING-system (Panksepp, 1998) is used to conceptualise a neurobiological basis for pleasure seeking. This SEEKING- system may be "hijacked" by rewards in different forms of addiction as well as in sexual obsessions. The polarity between "drive representation" and "object representation," as created by Freud (1933, 1940a), may correspond to the polarity identified in contemporary thinking between the addictive or compulsive characteristics of sexual gratification (drive representation) and the influence of early object representation on the later ability to integrate instinctual wishes into relationships (object representation). (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Association for the Advancement of Psychotherapy; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Attachment Disorders](#)
[*Object Relations](#)
[*Obsessions](#)
[*Paraphilias](#)
[*Sexual Addiction](#)
[Attachment Theory](#)
[Neurobiology](#)
[Pleasure](#)

Source: PsycINFO

14. GABAB receptor agonist only reduces ethanol drinking in light-drinking mice.

Citation: Pharmacology, Biochemistry and Behavior, August 2012, vol./is. 102/2(233-240), 0091-3057 (Aug 2012)

Author(s): Villas Boas, Gustavo Roberto; Zamboni, Camila Gadens; Peretti, Murilo Calvo; Correia, Diego; Lima Rueda, Andre Veloso; Camarini, Rosana; Brunialti-Godard, Ana Lucia; Boerngen-Lacerda, Roseli

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Institution: Villas Boas, Gustavo Roberto: Departamento de Farmacologia, Universidade Federal do Parana, Curitiba; Zamboni, Camila Gadens: Departamento de Farmacologia, Universidade Federal do Parana, Curitiba; Peretti, Murilo Calvo: Departamento de Farmacologia, Universidade Federal do Parana, Curitiba; Correia, Diego: Departamento de Farmacologia, Universidade Federal do Parana, Curitiba; Lima Rueda, Andre Veloso: Departamento de Farmacologia, Instituto de Ciencias Biomedicas, Universidade de Sao Paulo, Sao Paulo; Camarini, Rosana: Departamento de Farmacologia, Instituto de Ciencias Biomedicas, Universidade de Sao Paulo, Sao Paulo; Brunialti-Godard, Ana Lucia: Departamento de Biologia Geral, Universidade Federal de Minas Gerais, Belo Horizonte; Boerngen-Lacerda, Roseli: Departamento de Farmacologia, Universidade Federal do Parana, Curitiba

Language: English

Abstract: Baclofen, a GABAB agonist, reduces ethanol intake in animals and humans, but the contrary or no effect was also reported. Our previous study demonstrated that mice characterized as "loss of control over ethanol intake" had different Gabbr1 and Gabbr2 transcription levels, which express, respectively, the GABAB1 and GABAB2 subunits in brain areas related to addictive behavior. In the present study, we tested baclofen on ethanol intake in mice exposed to the free-choice paradigm. Adult male Swiss mice, individually housed, had free access to three bottles: ethanol (5% and 10%) and water. The protocol had four phases: acquisition (AC, 10 weeks), withdrawal (W, 4 cycles during 2 weeks of 2 day-free-choice and 2 day-only-water), reexposure (RE, 2 weeks), and adulteration of ethanol solutions with quinine (AD, 2 weeks). Mice characterized as "loss of control" (A, n = 11, preference for ethanol in AC and maintenance of ethanol intake levels in AD), heavy (H, n = 11, preference for ethanol in AC and reduction of ethanol intake levels in AD), and light (L, n = 16, preference for water in all phases) drinkers were randomly distributed into two subgroups receiving either intraperitoneal injections of all doses of baclofen (1.25, 2.5, and 5.0 mg/kg, given each dose twice in consecutive days) or saline, being exposed to free-choice. Fluid consumption was measured 24 h later. Baclofen reduced ethanol intake in group L. In group H a reduction compared to AC was observed. Group A maintained their high ethanol intake even after baclofen treatment. Activation of the GABAB receptor depends on the precise balance between the GABAB1 and GABAB2 subunits, so the disproportionate transcription levels, we reported in group A, could explain this lack of response to baclofen. These data highlight the importance to test baclofen in individuals with different ethanol drinking profiles, including humans. (PscINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Animal Drinking Behavior](#)
[*Ethanol](#)
[*Gamma Aminobutyric Acid Antagonists](#)
[Mice](#)

Source: PscINFO

15. A transcriptional study in mice with different ethanol-drinking profiles: Possible involvement of the GABAB receptor.

Citation: Pharmacology, Biochemistry and Behavior, August 2012, vol./is. 102/2(224-232), 0091-3057 (Aug 2012)

Author(s): Ribeiro, Andrea Frozino; Correia, Diego; Torres, Adriana Amorim; Villas Boas, Gustavo Roberto; Lima Rueda, Andre Veloso; Camarini, Rosana; Chiavegatto, Silvana; Boerngen-Lacerda, Roseli; Brunialti-Godard, Ana Lucia

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Institution: Ribeiro, Andrea Frozino: Department of General Biology, Universidade Federal de Minas Gerais, Belo Horizonte; Correia, Diego: Department of Pharmacology, Universidade Federal do Parana, Curitiba; Torres, Adriana Amorim: Department of General Biology, Universidade Federal de Minas Gerais, Belo Horizonte; Villas Boas, Gustavo Roberto: Department of Pharmacology, Universidade Federal do Parana, Curitiba; Lima Rueda, Andre Veloso: Department of Pharmacology, Universidade de Sao Paulo, Cidade Universitaria, Sao Paulo; Camarini, Rosana: Department of Pharmacology, Universidade de Sao Paulo, Cidade Universitaria, Sao Paulo; Chiavegatto, Silvana: Department of Pharmacology, Universidade de Sao Paulo, Cidade Universitaria, Sao Paulo; Boerngen-Lacerda, Roseli: Department of Pharmacology, Universidade Federal do Parana, Curitiba; Brunialti-Godard, Ana Lucia: Department of General Biology, Universidade Federal de Minas Gerais, Belo Horizonte

Language: English

Abstract: Previous studies have suggested that -aminobutyric acid-B (GABAB) receptor agonists effectively reduce ethanol intake. The quantification using real-time polymerase chain reaction of Gabbr1 and Gabbr2 mRNA from the prefrontal cortex, hypothalamus, hippocampus, and striatum in mice exposed to an animal model of the addiction developed in our laboratory was performed to evaluate the involvement of the GABAB receptor in ethanol consumption. We used outbred, Swiss mice exposed to a three-bottle free-choice model (water, 5% v/v ethanol, and 10% v/v ethanol) that consisted of four phases: acquisition (AC), withdrawal (W), reexposure (RE), and quinine-adulteration (AD). Based on individual ethanol intake, the mice were classified into three groups: "addicted" (A group; preference for ethanol and persistent consumption during all phases), "heavy" (H group; preference for ethanol and a reduction in ethanol intake in the AD phase compared to AC phase), and "light" (L group; preference for water during all phases). In the prefrontal cortex in the A group, we found high Gabbr1 and Gabbr2 transcription levels, with significantly higher Gabbr1 transcription levels compared with the C (ethanol-naive control mice), L, and H groups. In the hippocampus in the A group, Gabbr2 mRNA levels were significantly lower compared with the C, L, and H groups. In the striatum, we found a significant increase in Gabbr1 transcription levels compared with the C, L, and H groups. No differences in Gabbr1 or Gabbr2 transcription levels were observed in the hypothalamus among groups. In summary, Gabbr1 and Gabbr2 transcription levels were altered in cerebral areas related to drug taking only in mice behaviorally classified as "addicted" drinkers, suggesting that these genes may contribute to high and persistent ethanol consumption. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Animal Drinking Behavior](#)
[*Ethanol](#)
[*Gamma Aminobutyric Acid Agonists](#)
[*Hippocampus](#)
[*Prefrontal Cortex](#)
[Mice](#)

Source: PsycINFO

16. Testimonies from substance-abusing mothers.

Original Title: Temoignages de meres usageres de substances psychoactives.

Citation: Neuropsychiatrie de l'Enfance et de l'Adolescence, June 2012, vol./is. 60/4(291-296), 0222-9617 (Jun 2012)

Author(s): Wicker, A; Toutain, S; Greth, P

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Institution: Wicker, A.: Centre Psychotherapique Pour Enfants et Adolescents, Centre Hospitalier de Rouffach, Cernay; Toutain, S.: Cermes, Universite Paris Descartes, Paris; Greth, P.: Service de Psychiatrie, Centre Hospitalier de Mulhouse, Mulhouse

Language: French

Abstract: Objectives: From a survey on the future of the mothers having been seen by the team of coordination and intervention with the drug users (ECIMUD) of Mulhouse between 2004 and 2006, testimonies were collected by chance. Method: The study was realized in 2009 on 37 women for the retrospective part on medical files, then on 18 of these women having agreed to participate and to answer a questionnaire evaluating their social and medical future, which was the qualitative part of the study. These 18 women were met during interviews, which often deviated to the narrative of their courses of life. Results: They so wished to testify of their successful fight, very often thanks to their child(ren). They also showed themselves in search of gratitude of a good mother status. Finally, they

reported the necessity for the professionals to behave with them in an empathic way and to offer them a propping up that they appreciate all the more that they are socially disadvantaged. Discussion: These testimonies underline the need of specific and adapted care for every dyad continuing several years after the childbirth, in order to improve the future of these mothers and their children. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Masson SAS; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Mother Child Relations](#)
[*Mothers](#)
[Expert Testimony](#)
[Health](#)

Source: PsycINFO

17. The hypocretin/orexin system: Implications for drug reward and relapse.

Citation: Molecular Neurobiology, June 2012, vol./is. 45/3(424-439), 0893-7648;1559-1182 (Jun 2012)

Author(s): Plaza-Zabala, Ainhoa; Maldonado, Rafael; Berrendero, Fernando

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Institution: Plaza-Zabala, Ainhoa: Laboratory of Neuropharmacology, Department of Experimental and Health Sciences, University Pompeu Fabra, Barcelona; Maldonado, Rafael: Laboratory of Neuropharmacology, Department of Experimental and Health Sciences, University Pompeu Fabra, Barcelona; Berrendero, Fernando: Laboratory of Neuropharmacology, Department of Experimental and Health Sciences, University Pompeu Fabra, Barcelona

Language: English

Abstract: Hypocretins (also known as orexins) are hypothalamic neuropeptides involved in the regulation of sleep/wake states and feeding behavior. Recent studies have also demonstrated an important role for the hypocretin/orexin system in the addictive properties of drugs of abuse, consistent with the reciprocal innervations between hypocretin neurons and brain areas involved in reward processing. This system participates in the primary reinforcing effects of opioids, nicotine, and alcohol. Hypocretins are also involved in the neurobiological mechanisms underlying relapse to drug-seeking behavior induced by drug-related environmental stimuli and stress, as mainly described in the case of psychostimulants. Based on these preclinical studies, the use of selective ligands targeting hypocretin receptors could represent a new therapeutical strategy for the treatment of substance abuse disorders. In this review, we discuss and update the current knowledge about the participation of the hypocretin system in drug addiction and the possible neurobiological mechanisms involved in these processes regulated by hypocretin transmission. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*CNS Stimulating Drugs](#)
[*Drug Addiction](#)
[*Relapse \(Disorders\)](#)
[*Rewards](#)
[*Orexin](#)
[Neurobiology](#)

Source: PsycINFO

18. Outcome evaluation of a community alcohol and other drug intervention programme for offenders serving community sentences in Auckland, New Zealand.

- Citation:** New Zealand Journal of Psychology, 2011, vol./is. 40/3(120-128), 1179-7924 (2011)
- Author(s):** Wheeler, Amanda; Websdell, Polly; Wilson, Puti; Pulford, Justin; Galea, Susanna; Robinson, Elizabeth
- Correspondence Address:** Wheeler, Amanda: School of Human Services, Faculty of Health, Griffith University, Brisbane, QLD, Australia, a.wheeler@griffith.edu.au
- Institution:** Wheeler, Amanda: University of Auckland, Auckland; Websdell, Polly: Waitemata District Health Board; Wilson, Puti: Waitemata District Health Board; Pulford, Justin: University of Queensland, Brisbane, QLD; Galea, Susanna: University of Auckland, Auckland; Robinson, Elizabeth: University of Auckland, Auckland
- Language:** English
- Abstract:** The aim of this study was to follow-up an offender cohort directed to a community alcohol and drug (AOD) treatment programme via probation and assess whether self-reported substance use, impact of use and recidivism changed over 6-months. The cohort completed the Alcohol and Drug Outcome Measure (ADOM) at treatment entry and 3 and 6-months post-programme. Clients answered questions about treatment and its impact on recidivism and their health at follow-up. Data for 278 clients consenting to follow-up was available at entry; 96 completed 3-month and 53 6-month follow-up. Post-programme 3-month analysis (n=96) showed a significant reduction in alcohol and cannabis use. No further changes were evident between 3 and 6-months for the participants who completed the follow-up at 6-months. Physical health interference on daily functioning improved at 3-months and psychological health improved at 6-months. At both assessments most clients reported the programme had helped them reduce offending and were motivated to continue addressing their substance use. Enabling clients to address their AOD problems empowered them to address other health and psychosocial issues. Larger longer-term follow-up studies are required. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: New Zealand Psychological Society
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcohol Rehabilitation](#)
[*Criminal Rehabilitation](#)
[*Drug Rehabilitation](#)
[*Program Evaluation](#)
[Drug Abuse](#)
[Recidivism](#)
- Source:** PsycINFO
- Full Text:** Available in *fulltext* at [ProQuest](#)

19. The effects of lesion of the olfactory epithelium on morphine-induced sensitization and conditioned place preference in mice.

- Citation:** Behavioural Brain Research, July 2012, vol./is. 233/1(71-78), 0166-4328 (Jul 15, 2012)
- Author(s):** Niu, Haichen; Zheng, Yingwei; Rizak, Joshua D; Fan, Yaodong; Huang, Wei; Ma, Yuanye; Lei, Hao
- Correspondence Address:** Lei, Hao: State Key Laboratory of Magnetic Resonance and Atomic and Molecular Physics, Wuhan Institute of Physics and Mathematics, Chinese Academy of Sciences, Wuhan, China, 430071, leihao@wipm.ac.cn
- Institution:** Niu, Haichen: State Key Laboratory of Magnetic Resonance and Atomic and Molecular Physics, Wuhan Institute of Physics and Mathematics, Chinese Academy of Sciences, Wuhan; Zheng, Yingwei: Yunnan Key Laboratory of Primate Biomedical Research, Kunming; Rizak, Joshua D.: Kunming Institute of Zoology, Chinese Academy of Sciences, Yunnan; Fan, Yaodong: Yunnan Province Tumor Hospital, Department of

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Language:

English

Abstract:

Animals attain information about their environment through different sense organs. For example, the dominant external resource about the environment for rodents is obtained through olfaction. Many environmental conditions (stress or enriched environment) are known to affect an animal's susceptibility to drug addiction. However, it is not known how external information is integrated and paired with drug stimuli to develop into addictive behavior. Here, we investigated the effects of olfactory epithelium lesions induced with ZnSO₄ effusion (ZnE) on morphine-induced sensitization and conditioned place preference in mice. We found that the lesion of the olfactory epithelium attenuated the repeated morphine (40mg/kg)-induced behavioral sensitization and morphine-induced conditioned place preference (CPP) behaviors, such as hyper-locomotion during morphine (40mg/kg) conditioned training. Additionally, the expression of FosB-like proteins, transcription factors associated with behavioral alterations, in the nucleus accumbens of the brain was attenuated in morphine administered mice treated by ZnE. Taken together, these results indicated that lesion of the olfactory epithelium lead to a decrease in morphine sensitization and CPP behavior in mice as well as modulate specific molecular markers of neuroadaptation to drugs of abuse. These findings also suggest that olfaction plays an important role in the development of addictive behaviors that can be modulated by external actions. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication:

STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2012

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Morphine
*Place Conditioning
*Sense Organs
*Sensitization
*Skin (Anatomy)
Lesions
Mice
Olfactory Bulb

Source:

PsycINFO

20. Pramipexole- and methamphetamine-induced reward-mediated behavior in a rodent model of Parkinson's disease and controls.

Citation:

Behavioural Brain Research, July 2012, vol./is. 233/1(15-23), 0166-4328 (Jul 15, 2012)

Author(s):

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Riddle, J. L.: Department of Pharmacology, Chicago, IL; Rokosik, S. L.: Department of Pharmacology, Chicago, IL; Napier, T. C.: Department of Pharmacology, Chicago, IL

Language:

English

Abstract:

Pramipexole (PPX) is a dopamine agonist that is FDA-approved for treatment of motor dysfunction in Parkinson's disease and restless leg syndrome. In a subpopulation of treated patients, PPX can lead to impulsive-compulsive disorders including behavioral addictions and dopamine dysregulation syndrome, a phenomenon that mirrors drug addiction. Regardless of this clinical picture, the capacity of PPX to regulate reward-mediated behaviors remains unclear and has not been evaluated in an animal model of Parkinson's disease. To fill this gap, we examined the rewarding potential of

PPX in parkinsonian-like rats using conditioned place preference (CPP) and also evaluated associated motor behaviors. Methamphetamine (meth) and saline served as positive and negative controls, respectively. To model Parkinson's disease, the neurotoxin 6-OHDA was injected bilaterally into the dorsolateral striatum. The resulting lesions were verified functionally using a forelimb adjusting step and post mortem immunohistochemical staining of striatal tyrosine hydroxylase. Three pairings of meth (1mg/kg, ip), paired with a unique context, induced CPP in both 6-OHDA-treated and sham-operated rats; saline pairings had no effect. Three pairings of (+/-)PPX at 2mg/kg ip (equal to 1mg/kg of the active racimer) induced CPP in 6-OHDA-treated rats, but a higher dose (4mg/kg, ip (+/-)PPX) was needed to induce CPP in sham rats. In all rats, acute administration of 2mg/kg (+/-)PPX decreased locomotor activity; the behavior was normalized by the third (+/-)PPX administration. In summary, these findings reveal that (+/-)PPX has motor and rewarding effects and suggest the parkinsonian brain state may be more sensitive to the rewarding, but not motoric effects. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Dopamine](#)
[*Methamphetamine](#)
[*Nervous System Disorders](#)
[*Parkinson's Disease](#)
[*Restless Leg Syndrome](#)
[Rodents](#)

Source: PsycINFO

21. Cortical circuit dysfunction and cognitive deficits in schizophrenia-Implications for preemptive interventions.

Citation: European Journal of Neuroscience, June 2012, vol./is. 35/12(1871-1878), 0953-816X;1460-9568 (Jun 2012)

Author(s): Lewis, David A

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Institution: Lewis, David A.: Translational Neuroscience Program, Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA

Language: English

Abstract: Schizophrenia is a devastating disorder that is common, usually chronic, frequently associated with substantial co-morbidity for addictive and medical disorders and, as a consequence, very costly in both personal and economic terms. At present, no proven means for preventing or modifying the course of the illness exist. This review discusses evidence supporting the ideas that: (i) impairments in certain cognitive processes are the core feature of schizophrenia; (ii) these cognitive impairments reflect abnormalities in specific cortical circuits; and (iii) these circuitry abnormalities arise during childhood-adolescence. The implications of these findings for the development and implementation of safe, preemptive, disease-modifying interventions in individuals at high risk for a clinical diagnosis of schizophrenia are considered. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author. European Journal of Neuroscience-Federation of European Neuroscience Societies and Blackwell Publishing Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Brain Development](#)
[*Cerebral Atrophy](#)
[*Cognitive Impairment](#)
[*Intervention](#)
[*Schizophrenia](#)

Adolescent Development
Childhood Development

Source: PsycINFO
Full Text: Available in *fulltext* at *Wiley*

22. Applicability of Game Character Attachment Questionnaire in Chinese colleges students.

Citation: Chinese Journal of Clinical Psychology, April 2012, vol./is. 20/2(165-167), 1005-3611 (Apr 2012)

Author(s): Wei, Hua; Zhou, Zong-kui; Tian, Yuan; Luo, Qing; Wu, Shu-xin

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Language: Chinese

Abstract: Objective: To explore the reliability and validity of Game Character Attachment Questionnaire applied in Chinese college students. Methods: A sample of 481 college students was administered Game Character Attachment Questionnaire and Online Game Addiction Questionnaire. Results: There were four-factor model of Game Character Attachment,i.e., Identification/Friendship Suspension of Disbelief Control and Responsibility, and the four-factor model had a high co efficiency of internal consistency; The indexes of confirmatory factor analysis demonstrated the four-factor model had a good structure validity. Game character attachment questionnaire score and the online game addiction score had a high correlation, indicating that the questionnaire had good criterion-related validity. Conclusion: Game Character Attachment Questionnaire is a reliable and valid instrument. It can be used to assess the relationship between the game player and character. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Games
*Internet Addiction
*Psychometrics
*Test Reliability
*Test Validity
College Students

Source: PsycINFO

23. The CHRNA5/A3/B4 gene cluster and tobacco, alcohol, cannabis, inhalants and other substance use initiation: Replication and new findings using mixture analyses.

Citation: Behavior Genetics, July 2012, vol./is. 42/4(636-646), 0001-8244;1573-3297 (Jul 2012)

Author(s): Lubke, Gitta H; Stephens, Sarah H; Lessem, Jeffrey M; Hewitt, John K; Ehringer, Marissa A

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Institution: Lubke, Gitta H.: Department of Psychology, University of Notre Dame, Notre Dame, IN; Stephens, Sarah H.: University of Maryland School of Medicine, Boulder, CO; Lessem, Jeffrey M.: Institute for Behavioral Genetics, University of Colorado, Boulder, CO; Hewitt, John K.: Institute for Behavioral Genetics, University of Colorado, Boulder, CO; Ehringer, Marissa A.: Institute for Behavioral Genetics, University of Colorado, Boulder, CO

Language: English

Abstract: Multiple studies have provided evidence for genetic associations between single nucleotide polymorphisms (SNPs) located on the CHRNA5/A3/B4 gene cluster and various phenotypes related to Nicotine Dependence (Greenbaum et al. 2009). Only a few studies have investigated other substances of abuse. The current study has two aims, (1) to extend previous findings by focusing on associations between the CHRNA5/A3/B4 gene cluster and age of initiation of several different substances, and (2) to investigate heterogeneity in age of initiation across the different substances. All analyses were conducted with a subset of the Add Health study with available genetic data. The first aim was met by modeling onset of tobacco, alcohol, cannabis, inhalants, and other substance use using survival mixture analysis (SMA). Ten SNPs in CHRNA5/A3/B4 were used to predict phenotypic differences in the risk of onset, and differences between users and non-users. The survival models aim at investigating differences in the risk of initiation across the 5-18 age range for each phenotype separately. Significant or marginally significant genetic effects were found for all phenotypes. The genetic effects were mainly related to the risk of initiation and to a lesser extent to discriminating between users and non-users. To address the second goal, the survival analyses were complemented by a latent class analysis that modeled all phenotypes jointly. One of the ten SNPs was found to predict differences between the early and late onset classes. Taken together, our study provides evidence for a general role of the CHRNA5/A3/B4 gene cluster in substance use initiation that is not limited to nicotine and alcohol. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Age Differences](#)
[*Drug Usage](#)
[*Genetics](#)
[*Nicotine](#)
[*Phenotypes](#)
[Nucleotides](#)
[Polymorphism](#)

Source: PsycINFO

24. Genetic and environmental influences underlying externalizing behaviors, cigarette smoking and illicit drug use across adolescence.

Citation: Behavior Genetics, July 2012, vol./is. 42/4(614-625), 0001-8244;1573-3297 (Jul 2012)

Author(s): Korhonen, Tellervo; Latvala, Antti; Dick, Danielle M; Pulkkinen, Lea; Rose, Richard J; Kaprio, Jaakko; Huizink, Anja C

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Institution: Korhonen, Tellervo: Department of Mental Health and Substance Abuse Services, National Institute for Health and Welfare, Helsinki; Latvala, Antti: Department of Mental Health and Substance Abuse Services, National Institute for Health and Welfare, Helsinki; Dick, Danielle M.: Department of Psychiatry, Virginia Institute for Psychiatric and Behavioral Genetics, Virginia Commonwealth University, Richmond, VA; Pulkkinen, Lea: Department of Psychology, University of Jyväskylä, Jyväskylä; Rose, Richard J.: Department of Psychological and Brain Sciences, Indiana University, Bloomington, IN; Kaprio, Jaakko: Department of Mental Health and Substance Abuse Services, National Institute for Health and Welfare, Helsinki; Huizink, Anja C.: Department of Developmental Psychology, VU University Amsterdam, Amsterdam

Language: English

Abstract: We investigated genetic and environmental influences common to adolescent externalizing behavior (at age 12), smoking (at age 14) and initiation of drug use (at age 17) using the FinnTwin12 cohort data. Multivariate Cholesky models were fit to data from 737 monozygotic and 722 dizygotic twin pairs. Heritability of externalizing behavior was 56%, that of smoking initiation/amount 20/32%, and initiation of drug use 27%. In the best-fitting model common environmental influences explained most of the covariance between externalizing behavior and smoking initiation (69%) and amount (77%). Covariance between smoking initiation/amount and drug use was due to additive genetic (42/22%) and common environmental (58/78%) influences. Half of the covariance between externalizing behavior and drug use was due to shared genetic and half due to the environments shared by co-twins. Using a longitudinal, prospective design, our results indicate that early observed externalizing behavior provides significant underlying genetic and environmental influences common to later substance use, here manifested as initiation of drug use in late adolescence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Environment](#)
[*Externalization](#)
[*Genetics](#)
[*Tobacco Smoking](#)
[Adolescent Development](#)

Source: PsycINFO

25. Unusual MRI findings in a case of Marchiafava Bignami disease.

Citation: Neurology, May 2012, vol./is. 78/19(1537), 0028-3878;1526-632X (May 8, 2012)

Author(s): Bellido, S; Navas, I; Aranda, M. A; Ginestal, R; Venegas, B

Correspondence Address: Bellido, S., sara.bellido@gmail.com

Language: English

Abstract: Twenty-four hours after surgery for acute aortic dissection, a 51-year-old man with alcoholism developed agitation, decreased consciousness, mutism, and upbeat nystagmus on upward gaze. He also showed left-sided weakness with pyramidal signs and spastic limb ataxia. After 4 weeks treatment with thiamine supplementation, his neurologic and general condition improved. Marchiafava Bignami disease is associated with chronic alcoholism and nutritional deficiency. Although etiopathogenesis is unknown, alcohol toxicity and osmotic disorders are in relation with typical corpus callosum demyelination. Other CNS structures such as white matter tracts and middle cerebellar peduncles may be involved, but far less frequently. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: AAN Enterprises, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Etiology](#)
[*Myelin Sheath](#)
[*Nervous System Disorders](#)
[*White Matter](#)
[Alcoholism](#)
[Ataxia](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [Ovid](#)

26. Comparison between immigrant and Spanish native-born pathological gambling patients.

- Citation:** Psychological Reports, April 2012, vol./is. 110/2(555-570), 0033-2941;1558-691X (Apr 2012)
- Author(s):** Penelo, Eva; Granero, Roser; Fernandez-Aranda, Fernando; Aymami, Neus; Gomez-Pena, Monica; Moragas, Laura; Santamaria, Juan Jose; Custal, Nuria; Menchon, Jose Manuel; Jimenez-Murcia, Susana
- Correspondence Address:** Jimenez-Murcia, Susana, sjimenez@bellvitgehospital.ca
- Institution:** Penelo, Eva: Laboratori d'Estadística Aplicada, Departament de Psicobiologia i Metodologia de les Ciències de la Salut, Universitat Autònoma de Barcelona; Granero, Roser: Laboratori d'Estadística Aplicada, Departament de Psicobiologia i Metodologia de les Ciències, Universitat Autònoma de Barcelona; Fernandez-Aranda, Fernando: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona; Aymami, Neus: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona; Gomez-Pena, Monica: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona; Moragas, Laura: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona; Santamaria, Juan Jose: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona; Custal, Nuria: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona; Menchon, Jose Manuel: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona; Jimenez-Murcia, Susana: Department of Psychiatry, Bellvitge University, Hospital-IDIBELL, Barcelona
- Language:** English
- Abstract:** The study compared clinical, psychopathological, and personality profiles between immigrants and Spanish native-born pathological gambling patients. A total of 1,601 native-born and 133 immigrant patients attending treatment at a specialized hospital unit were administered a battery of questionnaires during clinical assessment. Outcome measures were compared between both groups and the incremental predictive accuracy of the area of origin was examined using a regression model. Native-born Spaniards showed a mean 2.6 yr. greater duration of the disorder, while immigrants scored higher on South Oaks Gambling Screen, frequency of going to casinos, and total money spent (in a single day and /or to recover losses). General psychopathology and personality scores did not differ between the cohorts. However, immigration from Asia had a statistically significantly incremental validity for pathological gambling in South Oaks Gambling Screen scores. Both cohorts shared more similarities than differences in their gambling profiles. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Psychological Reports; YEAR: 2012
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Addiction](#)
[*Immigration](#)
[*Pathological Gambling](#)
[*Personality](#)
[*Psychological Assessment](#)
- Source:** PsycINFO

27. Facebook addiction: Concerns, criticism, and recommendations-A response to Andreassen and colleagues.

- Citation:** Psychological Reports, April 2012, vol./is. 110/2(518-520), 0033-2941;1558-691X (Apr 2012)
- Author(s):** Griffiths, Mark D
- Correspondence Address:** Griffiths, Mark D.: International Gaming Research Unit, Psychology Division, Nottingham Trent University, Burton Street, Nottingham, United Kingdom, NG1 4BU, mark.griffiths@ntu.ac.uk

Institution: Griffiths, Mark D.: International Gaming Research Unit, Psychology Division, Nottingham Trent University, Nottingham

Language: English

Abstract: Comments on an article by Cecilie Schou Andreassen et al. (see record 2012-15879-015). This paper provides a brief critique of the Facebook addiction research field in relation to the Bergen Facebook Addiction Scale developed by An-dreassen and colleagues (2012). Just like the term "Internet addiction," the term "Facebook addiction" may already be obsolete because there are many activities that a person can engage in on the Facebook website (e.g , messaging friends, playing games like Farmville, and gambling). What is needed is a new psychometric scale examining potential addiction to a particular online application (i.e., social networking) rather than activity on a particular website (i.e , Facebook). (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Psychological Reports; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Extraversion](#)
[*Neuroticism](#)
[*Psychometrics](#)
[*Sociability](#)
[Conscientiousness](#)
[Emotions](#)
[Sleep](#)

Source: PsycINFO

28. Development of a Facebook Addiction Scale.

Citation: Psychological Reports, April 2012, vol./is. 110/2(501-517), 0033-2941;1558-691X (Apr 2012)

Author(s): Andreassen, Cecilie Schou; Torsheim, Torbjorn; Brunborg, Geir Scott; Pallesen, Stale

Correspondence Address: Andreassen, Cecilie Schou: Department of Psychosocial Science, University of Bergen, Chnstiesgt. 12, Bergen, Norway, 5015

Institution: Andreassen, Cecilie Schou: Department of Psychosocial Science, University of Bergen, Bergen Clinics Foundation, Bergen; Torsheim, Torbjorn: Department of Psychosocial Science, University of Bergen, Bergen; Brunborg, Geir Scott: Department of Psychosocial Science, University of Bergen, Bergen; Pallesen, Stale: Department of Psychosocial Science, University of Bergen, Bergen

Language: English

Abstract: The Bergen Facebook Addiction Scale (BFAS), initially a pool of 18 items, three reflecting each of the six core elements of addiction (salience, mood modification, tolerance, withdrawal, conflict, and relapse), was constructed and administered to 423 students together with several other standardized self-report scales (Addictive Tendencies Scale, Online Sociability Scale, Facebook Attitude Scale, NEO-FFI, BIS/BAS scales, and Sleep questions) That item within each of the six addiction elements with the highest corrected item-total correlation was retained in the final scale The factor structure of the scale was good (RMSEA = .046, CFI = .99) and coefficient alpha was .83. The 3-week test-retest reliability coefficient was .82 The scores converged with scores for other scales of Facebook activity. Also, they were positively related to Neuroticism and Extraversion, and negatively related to Conscientiousness. High scores on the new scale were associated with delayed bedtimes and rising times. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Psychological Reports; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Extraversion](#)

*Neuroticism
 *Psychometrics
 *Sociability
 Conscientiousness
 Emotions
 Sleep

Source: PsycINFO

29. Attitudes toward psychotropic medications.

Citation: Psychological Reports, April 2012, vol./is. 110/2(475-476), 0033-2941;1558-691X (Apr 2012)

Author(s): Fife, Stephanie A; Ketzenberger, Kay E; Olson, James N

Correspondence Address: Ketzenberger, Kay E.: Department of Psychology, University of Texas of the Permian Basin, 4901 E. University Blvd, Odessa, TX, US, 79762, ketzenberger_k@utpb.edu

Institution: Fife, Stephanie A.: Department of Psychology, University of Texas of the Permian Basin, TX; Ketzenberger, Kay E.: Department of Psychology, University of Texas of the Permian Basin, TX; Olson, James N.: Department of Psychology, University of Texas of the Permian Basin, TX

Language: English

Abstract: Attitudes and beliefs towards psychotropic medication were evaluated among psychiatric outpatients, patients receiving buprenorphine treatment for substance abuse, and a group who reported never having used psychotropic medications (non-users). The Drug Attitude Inventory scale and the Beliefs about Medicines Questionnaire General were used to assess attitudes and beliefs of 49 participants. Non-users exhibited more negative attitudes and beliefs toward psychotropic medication than both psychiatric groups. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Psychological Reports; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Attitudes
 *Drug Abuse
 *Drug Therapy
 *Drugs
 *Prescription Privileges
 Outpatients

Source: PsycINFO

30. Rationale for change in DSM-5.

Citation: Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(705), 1937-1888;1938-4114 (Jul 2012)

Author(s): O'Brien, Charles P

Institution: O'Brien, Charles P.: Department of Psychiatry, University of Pennsylvania, Philadelphia, PA

Language: English

Abstract: Comments on an article by Griffith Edwards (see record 2012-15737-020). Griffith has written a letter that is at once erudite, thoughtful, and informative. I would like to explain that his position on "dependence" is a rare example of two long-time friends in disagreement. I spend a good deal of time teaching medical students and general physicians about addictive disorders. It is not easy to explain why compulsive drug-taking behavior is called "dependence" in DSM-IV and is known in the vernacular as "addiction," whereas "dependence" in a patient strictly following doctor's orders is considered "normal" even while the patient is becoming tolerant to beta-blockers for hypertension, antidepressants for a mood disorder, benzodiazepines for anxiety, or opioids

for pain. The word dependence was already in use by physicians and pharmacologists to describe the normal state of tolerance that occurs after repeated drug taking and the subsequent withdrawal when the drug is abruptly stopped. I think that the confusion expressed by physicians is completely understandable and can be easily remedied other than by trying to obtain more time in the medical school curriculum. Of all the changes proposed by the DSM-5 workgroup, this one consistently is greeted by standing ovations when presented to audiences of physicians with the responsibility for the treatment of pain. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Diagnosis](#)
[*Drug Abuse](#)
[Diagnostic and Statistical Manual](#)

Source: PsycINFO

31. Combining abuse and dependence in DSM-5.

Citation: Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(702-704), 1937-1888;1938-4114 (Jul 2012)

Author(s): Hasin, Deborah S

Institution: Hasin, Deborah S.: Department of Psychiatry, Columbia University, New York, NY

Language: English

Abstract: Comments on an article by Griffith Edwards (see record 2012-15737-020). The conceptual formulations of Griffith Edwards's dependence syndrome have had an enormous influence on the measurement of substance use disorders, particularly regarding the formulations of the alcohol and drug dependence categories. We are currently preparing a review article that goes into these issues and others in considerable detail. However, in the meantime, responding now to the specific issues raised by Dr. Edwards provides the rationale for some of the DSM-5 changes more rapidly and to a wider audience than would otherwise be possible, and this format also allows presentation of the material in a more narrative fashion. In DSM-III-R and DSM-IV, alcohol and drug dependence were indicated with a set of diagnostic criteria that overlapped substantially but not completely with the dependence syndrome criteria because some of the latter could not be operationalized in a reliable, valid manner, despite concerted efforts to do so. A main difference between the dependence syndrome concept and DSM-III-R and DSM-IV was the relationship between dependence and abuse. Future studies will be needed to evaluate the implications of these changes more fully and to determine further refinements. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Diagnosis](#)
[*Drug Abuse](#)
[Diagnostic and Statistical Manual](#)

Source: PsycINFO

32. "The evil genius of the habit": DSM-5 seen in historical context.

Citation: Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(699-701), 1937-1888;1938-4114 (Jul 2012)

Author(s): Edwards, Griffith

Institution: Edwards, Griffith: National Addiction Centre, Institute of Psychiatry, London

Language: English

Abstract: The quest to find a name for Trotter's syndrome, and the status to be given it, continues to this day, most recently with the debate provoked by the proposed handling of the topic in

the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). This letter will attempt to give current concerns their historical context before commenting on the present situation. When in the latter part of the 19th century the medical profession in the United States, and some what later in the United Kingdom, began to campaign for the institutional treatment of the excessive drinker, the technical term used to designate the syndrome was inebriety. In 1964, a World Health Organization (WHO) expert committee proposed that dependence rather than addiction should be the term used to identify the compulsive habit. The dominant motivation for this recommendation was probably the wish to escape from the mind set engendered by opiate addiction as the template for all addictions. The WHO's concept of substance-specific and graded dependence syndromes, and the two-dimensional formulation, were taken up both by the International Classification of Diseases (ICD) and the DSM. There can be no doubt that DSM-5 will be a publication received with respect by the international scientific community. It seems possible, however, that the drug and alcohol chapter will considerably deviate from the ICD-11, and, if so, researchers will be faced with a choice as to which terminology they will use in the future. This would be the first time that significant disagreement would have occurred between DSM and ICD. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Diagnosis](#)
[*Drug Abuse](#)
[Diagnostic and Statistical Manual](#)

Source: PsycINFO

33. Do substance use norms and perceived drug availability mediate sexual orientation differences in patterns of substance use? Results from the California Quality of Life Survey II.

Citation: Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(675-685), 1937-1888;1938-4114 (Jul 2012)

Author(s): Cochran, Susan D; Grella, Christine E; Mays, Vickie M

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Institution: Cochran, Susan D.: Department of Epidemiology, Fielding School of Public Health, University of California, Los Angeles, Los Angeles, CA; Grella, Christine E.: Department of Psychiatry, David Geffen School of Medicine, University of California, Los Angeles, Los Angeles, CA; Mays, Vickie M.: Department of Psychology, University of California, Los Angeles, Los Angeles, CA

Language: English

Abstract: Objective: Illicit drug and heavy alcohol use is more common among sexual minorities compared with heterosexuals. This difference has sometimes been attributed to more tolerant substance use norms within the gay community, although evidence is sparse. The current study investigated the role of perceived drug availability and tolerant injunctive norms in mediating the linkage between minority sexual orientation status and higher rates of prior-year substance use. Method: We used data from the second California Quality of Life Survey (Cal-QOL II), a followback telephone survey in 2008-2009 of individuals first interviewed in the population-based 2007 California Health Interview Survey. The sample comprised 2,671 individuals, oversampled for minority sexual orientation. Respondents were administered a structured interview assessing past-year alcohol and illicit drug use, perceptions of perceived illicit drug availability, and injunctive norms concerning illicit drug and heavier alcohol use. We used structural equation modeling methods to test a mediational model linking sexual orientation and substance use behaviors via perceptions of drug availability and social norms pertaining to substance use. Results: Compared with heterosexual individuals, sexual minorities reported higher levels of substance use, perceived drug availability, and tolerant social norms. A successfully fitting model suggests that much of the association between

minority sexual orientation and substance use is mediated by these sexual orientation-related differences in drug availability perceptions and tolerant norms for substance use. Conclusions: Social environmental context, including subcultural norms and perceived drug availability, is an important factor influencing substance use among sexual minorities and should be addressed in community interventions. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Quality of Life](#)
[*Sexual Orientation](#)

Source: PsycINFO

34. Factors associated with first utilization of different types of care for alcohol problems.

Citation: Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(647-656), 1937-1888;1938-4114 (Jul 2012)

Author(s): Dawson, Deborah A; Goldstein, Rise B; Grant, Bridget F

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Institution: Dawson, Deborah A.: Kelly Government Services, Bethesda, MD; Goldstein, Rise B.: Laboratory of Epidemiology and Biometry, Division of Intramural Clinical and Biological Research, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD; Grant, Bridget F.: Laboratory of Epidemiology and Biometry, Division of Intramural Clinical and Biological Research, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD

Language: English

Abstract: Objective: The purpose of this research was to investigate whether factors associated with first obtaining care for alcohol problems vary by source of care. Method: This study used data from the National Epidemiologic Survey on Alcohol and Related Conditions to examine initiation of different types of care over a 3-year follow-up interval among individuals with baseline alcohol use disorders who had not previously obtained any care (n = 2,170). Three hierarchical, mutually exclusive types of care were compared: substance use disorder (SUD) specialty sources, general medical but no SUD specialty sources, and nonmedical sources only. Results: Having injured oneself or someone else because of drinking was associated with initiating all three types of care. Additional factors associated with initiating care from SUD specialty treatment sources (vs. no care) comprised male sex, alcohol use disorder severity, major financial problems, and nondependent tobacco/drug use. Factors associated with initiating care from general medical but not SUD specialty sources (vs. no care) comprised marriage/cohabitation, college student status, number of medical conditions, and other substance dependence. Factors associated with obtaining care only from nonmedical sources (vs. no care) comprised low income and anxiety disorder. When direct comparisons were made among types of care, factors drawing individuals into general medical care for reasons not necessarily related to alcohol problems were those that primarily distinguished utilization of general medical sources from the other two types of care. Conclusions: Results support the importance of screening in general medical practice and student health services as an important means of identifying individuals in need of brief intervention or more intensive SUD treatment and reiterate the importance of nonmedical sources for individuals whose alcohol problems might never be addressed in routine medical visits. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Health Care Services](#)
[*Health Care Utilization](#)

Source: PsycINFO

35. Who seeks care where? Utilization of mental health and substance use disorder treatment in two national samples of individuals with alcohol use disorders.

- Citation:** Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(635-646), 1937-1888;1938-4114 (Jul 2012)
- Author(s):** Edlund, Mark J; Booth, Brenda M; Han, Xiaotong
- Correspondence Address:** Edlund, Mark J.: RTI International, Behavioral Health Epidemiology, 3040 Cornwallis Road, P.O. Box 12194, Research Triangle Park, NC, US, 27709-2194, medlund@rti.org
- Institution:** Edlund, Mark J.: RTI International, Behavioral Health Epidemiology, Research Triangle Park, NC; Booth, Brenda M.: Health Services Research & Development Center for Mental Healthcare Outcomes and Research, Central Arkansas Veterans Healthcare System, North Little Rock, AR; Han, Xiaotong: Division of Health Services Research, Department of Psychiatry, College of Medicine, University of Arkansas for Medical Sciences, Little Rock, AR
- Language:** English
- Abstract:** Objective: Only a fraction of individuals with alcohol use disorders (AUDs) receive any AUD treatment during a given year. If a substantial proportion of individuals with unmet need for AUD treatment are receiving mental health treatment, accessibility of AUD treatment could potentially be improved by implementing strategies to ensure that individuals receiving mental health care are referred to the AUD sector or by increasing rates of AUD treatment in individuals receiving mental health treatment. Method: We assessed patterns and predictors of mental health treatment and AUD treatment among individuals with 12-month AUDs, using secondary data analyses from two national surveys, the National Survey on Drug Use and Health (NSDUH; n = 4,545 individuals with AUDs) and the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC; n = 3,327 individuals with AUDs). Results: In both NSDUH and NESARC, 8% of individuals with AUDs reported past-year AUD treatment. Among individuals with AUDs, mental health treatment was more common than AUD treatment, with 20% of NSDUH respondents and 11% of NESARC respondents reporting receiving mental health treatment. Greater mental health morbidity increased the odds of mental health treatment, and AUD severity increased the odds of AUD treatment. Mental health morbidity also increased the odds of AUD treatment, mainly by increasing the odds of receiving the category of both AUD and mental health treatment. Conclusions: Because individuals with AUDs are more likely to receive mental health treatment than AUD treatment, a key opportunity to improve the overall accessibility of treatment for AUDs may be to focus on improving AUD treatment among individuals receiving mental health treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Health Care Utilization](#)
[*Mental Health Services](#)
- Source:** PsycINFO

36. Cognitive remediation therapy during treatment for alcohol dependence.

- Citation:** Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(625-634), 1937-1888;1938-4114 (Jul 2012)
- Author(s):** Rupp, Claudia I; Kemmler, Georg; Kurz, Martin; Hinterhuber, Hartmann; Fleischhacker, W. Wolfgang
- Correspondence Address:** Rupp, Claudia I.: Division of Biological Psychiatry, Department of Psychiatry and Psychotherapy, Innsbruck Medical University, Anichstrasse 35, Innsbruck, Austria, 6020, claudia.rupp@i-med.ac.at
- Institution:** Rupp, Claudia I.: Division of Biological Psychiatry, Department of Psychiatry and Psychotherapy, Innsbruck Medical University, Innsbruck; Kemmler, Georg: Division of

Biological Psychiatry, Department of Psychiatry and Psychotherapy, Innsbruck Medical University, Innsbruck; Kurz, Martin: Division of Addiction, Sigmund Freud Clinic, Graz; Hinterhuber, Hartmann: Division of General and Social Psychiatry, Department of Psychiatry and Psychotherapy, Innsbruck Medical University, Innsbruck; Fleischhacker, W. Wolfgang: Division of Biological Psychiatry, Department of Psychiatry and Psychotherapy, Innsbruck Medical University, Innsbruck

Language:	English
Abstract:	Objective: Cognitive impairments in individuals with alcohol dependence may interfere with the progress of treatment and contribute to the progression of the disease. This study aimed to determine whether cognitive remediation (CR) therapy applied during treatment for alcohol dependence improves cognitive functioning in alcohol-dependent inpatients. A secondary aim was to evaluate whether the benefits of CR generalize to noncognitive clinically meaningful outcomes at the end of inpatient treatment. Method: Forty-one alcohol dependent patients entering inpatient treatment for alcohol dependence were randomly assigned to receive conventional treatment (n = 21) or an additional 12 sessions of computer-assisted CR focusing on cognitive enhancement in attention/executive function and memory domains (n = 20). Assessments of cognitive abilities in these domains as well as of psychological well-being and alcohol craving were conducted at baseline (at the beginning of inpatient treatment) and after CR (at the end of treatment). Results: Results indicated that, relative to patients completing conventional treatment, those who received supplemental CR showed significant improvement in attention/executive function and memory domains, particularly in attention (alertness, divided attention), working memory, and delayed memory (recall). In addition, patients receiving CR during alcohol-dependence treatment showed significantly greater improvements in psychological well-being (Symptom Checklist-90-Revised) and in the compulsion aspect of craving (Obsessive Compulsive Drinking Scale-German version). Conclusions: CR during inpatient treatment for alcohol dependence is effective in improving cognitive impairments in alcohol-dependent patients. The benefits generalize to noncognitive outcomes, demonstrating that CR may be an efficacious adjunctive intervention for the treatment of alcohol dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Publication Type:	Journal; Peer Reviewed Journal
Subject Headings:	*Alcoholism *Cognitive Ability *Cognitive Therapy *Executive Function
Source:	PsycINFO

37. The ties that bind: Bonding versus bridging social capital and college student party attendance.

Citation:	Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(604-612), 1937-1888;1938-4114 (Jul 2012)
Author(s):	Buettner, Cynthia K; Debies-Carl, Jeffrey S
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Institution:	Buettner, Cynthia K.: Department of Human Development and Family Science, Ohio State University, Columbus, OH; Debies-Carl, Jeffrey S.: Department of Sociology, University of New Haven, West Haven, CT
Language:	English
Abstract:	Objective: This study explored the relationship between bonding and bridging social capital and college student attendance at alcohol-present parties, a common method for building informal social networks. Method: A random sample of students (n = 6,291; 52% female) from a large public midwestern university completed a survey regarding their alcohol use and party-related behaviors on targeted weekends. The survey also included questions regarding students' living arrangements, romantic relationships, and membership in student and community organizations. Results: Based on a dichotomous

logistic regression analysis, we concluded that the act of attending parties largely serves as a complement to, rather than a substitute for, more conventional and formal social capital. Membership in bonding groups is associated with increased odds of party attendance, and bridging exerts no direct effect on party attendance. However, bridging capital does mitigate the effect of bonding capital, reducing its apparent tendency to promote or contribute to partying. Conclusions: Off-campus parties may offer an informal supplement to more conventional social capital as students establish themselves in their new context. These findings may have implications for structural decisions (e.g., number of roommates) as well as the design of context-based prevention programs that address students' need to quickly build social capital without exposing both themselves and the students around them to the harms associated with high-risk drinking. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*College Students](#)
[*Drug Usage](#)
[*Leisure Time](#)
[*Social Capital](#)
[*Social Networks](#)

Source: PsycINFO

38. Associations between adolescents heavy drinking and problem drinking in early adulthood: Implications for prevention.

Citation: Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(542-548), 1937-1888;1938-4114 (Jul 2012)

Author(s): Norstrom, Thor; Pape, Hilde

Correspondence Address: Norstrom, Thor: Swedish Institute for Social Research, Stockholm University, Stockholm, Sweden, S-106 91, totto@sofi.su.se

Institution: Norstrom, Thor: Swedish Institute for Social Research, Stockholm University, Stockholm; Pape, Hilde: Norwegian Institute for Alcohol and Drug Research, Oslo

Language: English

Abstract: Objective: We assessed how heavy episodic drinking (HED) in adolescence (Time 1) was related to hazardous drinking as well as symptoms of alcohol problems and dependence in early adulthood (Time 2). The key question was to what extent preventive measures targeted at underage HED may have a potential to reduce problem drinking in early adulthood. Method: Data are from the 1992 (Time 1, ages 14-17 years) and 2005 (Time 2) waves of the Young in Norway Longitudinal Study (N = 1,764). In addition to odds ratios and relative risks, we calculated population-attributable fractions to estimate how the prevalence of hazardous drinking and alcohol problems in early adulthood would be affected if adolescent HED at various frequencies were eliminated. The results were adjusted for age, gender, and measures on impulsivity and delinquency. Results: The risk of problem drinking at Time 2 increased with increasing frequency of HED at Time 1, but a great deal of discontinuity in drinking behaviors was also observed. The population-attributable fractions indicated that if all instances of HED at Time 1 were eliminated, the expected reduction in hazardous drinking and alcohol problems at Time 2 would be 11% and 15%, respectively. Conclusions: Because of a marked discontinuity in drinking behaviors from adolescence to early adulthood, the potential long-term effects of interventions targeted at HED among youth are likely to be limited. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Alcoholism](#)
[*Attribution](#)
[*Drinking Behavior](#)

Source: PsycINFO

39. Editor's corner: Editorial in reply to the comments of Griffith Edwards.

- Citation:** Journal of Studies on Alcohol and Drugs, July 2012, vol./is. 73/4(521-522), 1937-1888;1938-4114 (Jul 2012)
- Author(s):** Schuckit, Marc A
- Institution:** Schuckit, Marc A.: University of California, San Diego, CA
- Language:** English
- Abstract:** Comments on an article by Griffith Edwards (see record 2012-15737-020). The following are some of my own reflections and biases on the important issues raised by Griffith. To me, diagnostic manuals, such as the DSMs, are directed primarily toward clinicians. To be useful to practitioners, most of whom are busy and few of whom are experts in substance-related conditions, the criteria must be easy to use and flexible enough to be applied to a wide range of patients and clients. The ideal diagnostic manual would fulfill the original desire of the DSM-5 process that encouraged work groups to consider incorporating biological tests into the criteria sets. The absence of precise biological criteria relates to the issue of what these disorders really are. In the current state of affairs, one opinion is not necessarily much more accurate than another. Sometimes, in developing these manuals, less change is better than more. In conclusion, as always, I deeply respect Griffith Edwards's thoughts. In fact, because of the blurry image of the disorders we are discussing, I cannot be sure whether he might be correct regarding those items on which we respectfully disagree. However, it's possible that my perspective is correct. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Addiction](#)
[*Diagnosis](#)
[*Drug Abuse](#)
[Diagnostic and Statistical Manual](#)
- Source:** PsycINFO

40. Motivation to change as a mediator for the longitudinal relationships of gender and alcohol severity with one-year drinking outcome.

- Citation:** Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(504-513), 1937-1888;1938-4114 (May 2012)
- Author(s):** Small, Jeon; Ounpraseuth, Songthip; Curran, Geoffrey M; Booth, Brenda M
- Correspondence Address:** Small, Jeon: Prevention Research Center, University of California, Berkeley, 1995 University Avenue, Suite 450, Berkeley, CA, US, 94704, Jsmall@PREV.org
- Institution:** Small, Jeon: University of California, Berkeley, Berkeley, CA; Ounpraseuth, Songthip: Department of Biostatistics, University of Arkansas for Medical Sciences, Little Rock, AR; Curran, Geoffrey M.: Department of Psychiatry, University of Arkansas for Medical Sciences, Little Rock, AR; Booth, Brenda M.: Department of Psychiatry, University of Arkansas for Medical Sciences, Little Rock, AR
- Language:** English
- Abstract:** Objective: We examined whether motivation to change mediated the relationships between gender and baseline alcohol severity with drinking outcome at 12-month follow-up in a longitudinal community sample. Method: Data were from baseline and 12-month interviews from the Rural Alcohol Study, a probability sample of rural and urban at-risk drinkers (N = 733) from six southern states. At-risk drinkers were identified through a telephone-screening interview. Measures of motivation (problem recognition and taking action) were the resultant two factors derived from the Stages of Change Readiness and Treatment Eagerness Scale. Items on social consequences of drinking measured alcohol severity. Structural equation models examined relationships between baseline alcohol severity and motivation with drinks per drinking day at 12 months. Results: We identified significant, direct paths between drinking at 12 months and alcohol

severity and taking action with an unstandardized estimate of 0.116 ($p < .05$), alcohol severity and problem recognition (0.423, $p < .01$), and each of the two "motivation" latent constructs-problem recognition (1.846, $p < .01$) and taking action (-0.660, $p < .01$). Finally, the combined direct and negative effect of gender on alcohol consumption at 12-month follow-up was statistically significant, with an unstandardized estimate of -0.970 ($p < .01$). Conclusions: The current study offers evidence for motivation to change as a viable mechanism through which alcohol severity is associated with subsequent drinking outcomes. More research is needed to further explore the persistence of motivation to change on drinking outcomes over time. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*At Risk Populations](#)
[*Human Sex Differences](#)
[*Treatment Outcomes](#)
[Severity \(Disorders\)](#)

Source: PsycINFO

41. Do protective behavioral strategies moderate the relationship between negative urgency and alcohol-related outcomes among intercollegiate athletes?

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(498-503), 1937-1888;1938-4114 (May 2012)

Author(s): Weaver, Cameron C; Martens, Matthew P; Smith, Ashley E

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Institution: Weaver, Cameron C.: Department of Psychological Sciences, University of Missouri, Columbia, MO; Martens, Matthew P.: Department of Educational, School, and Counseling Psychology, University of Missouri, Columbia, MO; Smith, Ashley E.: Department of Educational, School, and Counseling Psychology, University of Missouri, Columbia, MO

Language: English

Abstract: Objective: The purpose of this study was to examine the moderating effect of protective behavioral strategies on the relationship between negative urgency and alcohol outcomes. Method: Participants were college students who endorsed participating in club/intramural or varsity athletics. The students ($N = 234$; 73.9% female) completed measures of negative urgency, protective behavioral strategies, alcohol use, and alcohol-related problems. Separate hierarchical multiple regression analyses were conducted for each subscale of the Protective Behavioral Strategies Scale to test for moderation. Results: Results indicated that protective behavioral strategies aimed at serious harm reduction moderated the relationship between negative urgency and alcohol use, whereas strategies aimed at avoiding excessive or rapid drinking moderated the relationship between negative urgency and alcohol-related problems. Strategies that involved planning drinking activities in advance did not moderate the relationship between negative urgency and alcohol outcomes. Conclusions: The current investigation provides further evidence for the role of protective behavioral strategies against known risk factors for alcohol use and related problems. Further, the paper suggests that type of strategy used matters when attempting to mitigate the relationship between negative urgency and alcohol outcomes. Limitations and future directions are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Athletes](#)
[*Behavior](#)
[*Protective Factors](#)

[*Risk Factors](#)
[Strategies](#)

Source: PsycINFO

42. Association between social influence and drinking outcomes across three years.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(489-497), 1937-1888;1938-4114 (May 2012)

Author(s): Stout, Robert L; Kelly, John F; Magill, Molly; Pagano, Maria E

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Institution: Stout, Robert L.: Pacific Institute for Research and Evaluation, Decision Sciences Institute, Pawtucket, RI; Kelly, John F.: Center for Addiction Medicine, Department of Psychiatry, Massachusetts General Hospital, Boston, MA; Magill, Molly: Center for Alcohol and Addiction Studies, Brown University, Providence, RI; Pagano, Maria E.: Department of Psychiatry, Division of Child Psychiatry, Case Western Reserve University School of Medicine, Cleveland, OH

Language: English

Abstract: Objective: Multiple studies have shown social network variables to mediate and predict drinking outcome, but, because of self-selection biases, these studies cannot reliably determine whether the influence is causal or correlational. The goal of this study was to evaluate evidence for a causal role for social network characteristics in determining long-term outcomes using state-of-the-art statistical methods. Method: Outpatient and aftercare clients enrolled in Project MATCH (N = 1,726) were assessed at intake and at 3, 6, 9, 12, and 15 months; the outpatient sample was also followed to 39 months. Generalized linear modeling with propensity stratification tested whether changes in social network ties (i.e., number of pro-abstainers and pro-drinkers) at Month 9 predicted percentage of days abstinent and drinks per drinking day at 15 and 39 months, covarying for Alcoholics Anonymous (AA) attendance at Month 9. Results: An increase in the number of pro-drinkers predicted worse drinking outcomes, measured by percentage of days abstinent and drinks per drinking day, at Months 15 and 39 ($p < .0001$). An increase in the number of pro-abstainers predicted more percentage of days abstinent for both time periods ($p < .01$). The social network variables uniquely predicted 5%-12% of the outcome variance; AA attendance predicted an additional 1%-6%. Conclusions: Network composition following treatment is an important and plausibly causal predictor of alcohol outcome across 3 years, adjusting for multiple confounders. The effects are consistent across patients exhibiting a broad range of alcohol-related impairment. Results support the further development of treatments that promote positive social changes and highlight the need for additional research on the determinants of social network changes. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Rehabilitation](#)
[*Alcoholics Anonymous](#)
[*Alcoholism](#)
[*Social Influences](#)
[*Social Networks](#)

Source: PsycINFO

43. Self-efficacy and HIV risk behaviors among heroin users in Taiwan.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(469-476), 1937-1888;1938-4114 (May 2012)

Author(s): Ko, Nai-Ying; Wang, Peng-Wei; Wu, Hung-Chi; Yen, Chia-Nan; Hsu, Su-Ting; Yeh, Yi-Chun; Hung, Kuan-Sheng; Yen, Cheng-Fang

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Institution: Ko, Nai-Ying: Department of Nursing, College of Medicine, National Cheng Kung University and Hospital, Tainan; Wang, Peng-Wei: Department of Psychiatry, Kaohsiung Medical University Hospital, Kaohsiung; Wu, Hung-Chi: Department of Addiction Science, Kai-Suan Psychiatric Hospital, Kaohsiung; Yen, Chia-Nan: Department of Psychiatry, Tainan Hospital, Department of Health, Tainan; Hsu, Su-Ting: Department of Psychiatry, Chang-Gung Memorial Hospital, Kaohsiung Medical Center, Chang Gung University; Yeh, Yi-Chun: Department of Psychiatry, Kaohsiung Medical University Hospital, Kaohsiung; Hung, Kuan-Sheng: Department of Addiction Science, Kai-Suan Psychiatric Hospital, Kaohsiung; Yen, Cheng-Fang: Department of Psychiatry, Kaohsiung Medical University Hospital, Kaohsiung

Language: English

Abstract: Objective: This study examined the predictors of self-efficacy in reducing risky injection behaviors among heroin users receiving methadone maintenance treatment (MMT). Method: The Methadone Maintenance Treatment Outcome Study was an 18-month prospective study from March 2007 to July 2008. Data collection was conducted in the substance use disorders treatment outpatient clinics of three hospitals in southern Taiwan. A total of 368 opioid-dependent heroin users (13.6% women) were interviewed at baseline and at 3-, 6-, 9-, 12-, 15- and 18-month follow-ups. The level of self-efficacy in reducing risky injection behaviors was repeatedly assessed using the Self-Efficacy Scale for HIV Risk Behaviors. Demographic and substance use characteristics, HIV serostatus, family function, depression, and pros and cons of heroin use were collected at baseline, and methadone dosage at each follow-up interview and the duration of retention in the MMT program were also recorded. Results: The results of the generalized estimating equation indicated that a lower educational level, concurrent methamphetamine use, a younger age at first heroin use, a lower methadone dosage, a higher level of depression, and a shorter duration of retention in the MMT program were predictive of a lower level of self-efficacy in reducing risky injection behaviors. Conclusions: This study found that personal and MMT-related factors were predictive of a lower level of self-efficacy among heroin users receiving MMT. Programs implemented to promote a higher level of self-efficacy should be provided to heroin users in the MMT program. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*HIV](#)
[*Methadone Maintenance](#)
[*Risk Taking](#)
[*Self Efficacy](#)
[Heroin](#)

Source: PsycINFO

44. Effects of age and life transitions on alcohol and drug treatment outcome over nine years.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(459-468), 1937-1888;1938-4114 (May 2012)

Author(s): Satre, Derek D; Chi, Felicia W; Mertens, Jennifer R; Weisner, Constance M

Correspondence Address: Satre, Derek D.: University of California, San Francisco, 401 Parnassus Avenue, Box 0984, San Francisco, CA, US, 94143, dereks@lppi.ucsf.edu

Institution: Satre, Derek D.: Department of Psychiatry, University of California, San Francisco, CA; Chi, Felicia W.: Division of Research, Kaiser Permanente Northern California, Oakland, CA; Mertens, Jennifer R.: Division of Research, Kaiser Permanente Northern California, Oakland, CA; Weisner, Constance M.: Department of Psychiatry, University of California, San Francisco, CA

Language: English

Abstract: Objective: The purpose of this study was to examine the effects of age, common life transitions, treatment, and social support on outcomes 5-9 years after alcohol and other drug (AOD) treatment intake. Method: Participants were patients from a large outpatient

AOD treatment program in an integrated health plan. There were 1,951 participants interviewed at intake, of whom 1,646 (84%) completed one or more telephone follow-up interviews at 5, 7, and 9 years. Measures included AOD use based on the Addiction Severity Index; treatment; and changes in marital, employment, and health status in the years between each follow-up. We compared participants by age group (18-39, 40-54, and ≥ 55 years old at intake) and examined factors (time invariant and time varying) associated with outcomes at 5, 7, and 9 years by fitting mixed-effects logistic random intercept models. Results: Changes in marital, employment, and health status varied significantly by age. Factors associated with remission across Years 5-9 included being in the middle-aged versus younger group ($p < .001$); female gender ($p < .001$); not losing a partner to separation, divorce, or death ($p < .001$); not experiencing a decline in health ($p = .021$); having any close friends supportive of recovery ($p < .001$); and not having any close friends who encourage AOD use ($p < .001$). Additional predictors, including employment changes, varied by drug versus alcohol abstinence outcome measures. Conclusions: Negative life transitions vary by age and are associated with worse outcomes. Older age and social support are associated with long-term AOD remission and abstinence. Findings inform treatment strategies to enhance recovery across the life span. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Age Differences](#)
[*Alcohol Rehabilitation](#)
[*Drug Rehabilitation](#)
[*Life Changes](#)
[*Treatment Outcomes](#)
[Social Support](#)

Source: PsycINFO

45. Trends in alcohol- and drug-related emergency department and primary care visits: Data from four U.S. national surveys (1995-2010).

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(454-458), 1937-1888;1938-4114 (May 2012)

Author(s): Cherpitel, Cheryl J; Ye, Yu

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Institution: Cherpitel, Cheryl J.: Alcohol Research Group, Emeryville, CA; Ye, Yu: Alcohol Research Group, Emeryville, CA

Language: English

Abstract: Objective: The purpose of this study was to update trends in alcohol- and drug-related emergency department and primary care visits over the last 15 years in the United States. Method: A trend analysis was conducted on substance-related health services visits, based on self-reported alcohol or other drug use within 6 hours before an injury and/or illness event, from four National Alcohol Surveys: 1995, 2000, 2005, and 2010. Results: A significant upward trend was found from 1995 to 2010 in alcohol-related emergency department visits but not in alcohol-related primary care visits. The odds of an alcohol-related emergency department visit doubled between 1995 and 2010 (odds ratio = 2.36). No significant trend was found in either drug-related emergency department or drug-related primary care visits between 1995 and 2010. Conclusions: These data suggest that alcohol-related emergency department visits have increased significantly over the past 15 years, whereas drug-related emergency department visits may have stabilized. These findings underscore the opportunity provided by the emergency department for screening and brief intervention for alcohol-related problems and suggest that Healthy People 2010 objectives calling for a reduction in substance-related emergency department visits were not realized. Thus, it might be prudent to adjust Healthy People 2020 objectives accordingly. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Emergency Services](#)
[*Health Care Services](#)
[*Primary Health Care](#)
[*Trends](#)
[Alcohol Drinking Patterns](#)
[Drug Usage](#)
[Surveys](#)

Source: PsycINFO

46. Developmental consistency in associations between depressive symptoms and alcohol use in early adolescents.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(444-453), 1937-1888;1938-4114 (May 2012)

Author(s): McCarty, Carolyn A; Wymbs, Brian T; King, Kevin M; Mason, W. Alex; Vander Stoep, Ann; McCauley, Elizabeth; Baer, John

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Institution: McCarty, Carolyn A.: University of Washington, Center for Child Health, Behavior, and Development, Seattle, WA; Wymbs, Brian T.: Seattle Children's Research Institute, Center for Child Health, Behavior, and Development, Seattle, WA; King, Kevin M.: Department of Psychology, University of Washington, Seattle, WA; Mason, W. Alex: Boys Town National Research Institute for Child and Family Studies, Boys Town, NE; Vander Stoep, Ann: Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA; McCauley, Elizabeth: University of Washington, Seattle, WA; Baer, John: Veterans Affairs Medical Center, Seattle, WA

Language: English

Abstract: Objective: Despite frequent theorizing, prior literature on the association between depressive symptoms and alcohol use in adolescence has been inconsistent. Yet studies have varied widely with respect to age at assessments, time frame of prediction, and controls for comorbid conditions and demographic factors. The current study examined whether the associations between depressive symptoms and alcohol use were similar in valence and magnitude over a 4-year period in early adolescence. Method: A sample of 521 young adolescents and their parents were interviewed every year from sixth (Mage = 12.0 years) through ninth grades. At each interview, symptom counts on depressive and conduct disorders were generated from the Diagnostic Interview Schedule for Children. Adolescents also reported on their alcohol use, which was converted to a binary variable. Autoregressive, cross-lagged panel models specifying depressive and conduct disorder symptoms as predictors of alcohol use 1 year later with equality constraints were tested and compared with models allowing path coefficients to vary over time. Results: For youth self-report, depressive symptoms were positively associated with alcohol use 1 year later over and above conduct problems and earlier alcohol use throughout early adolescence. By parental report, only very early adolescent depressive symptoms (sixth to seventh grades) were associated with alcohol use. Gender did not moderate findings for analyses with self- or parental-report data. Conclusions: These results indicate that, even in the context of conduct disorder symptoms, depressive symptoms are important indicators of risk for use of alcohol across early adolescence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: Society for Research in Child Development. Apr, 2011. Montreal. ON, Canada. Analyses were previously presented at the aforementioned conference.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Comorbidity](#)
[*Demographic Characteristics](#)
[*Drug Usage](#)
[*Major Depression](#)
[Symptoms](#)

Source: PsycINFO

47. Do peers' parents matter? A new link between positive parenting and adolescent substance use.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(423-433), 1937-1888;1938-4114 (May 2012)

Author(s): Cleveland, Michael J; Feinberg, Mark E; Osgood, D. Wayne; Moody, James

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Institution: Cleveland, Michael J.: Pennsylvania State University, State College, PA; Feinberg, Mark E.: Pennsylvania State University, State College, PA; Osgood, D. Wayne: Pennsylvania State University, State College, PA; Moody, James: Duke University, Durham, NC

Language: English

Abstract: Objective: Although studies have demonstrated that an adolescent's parents and friends both influence adolescent substance use, it is not known whether the parenting experienced by one's friends also affects one's own use. Drawing on conceptions of shared parenting and the tenets of coercion theory, we investigated the extent to which three domains of parenting behaviors (parental knowledge, inductive reasoning, and consistent discipline) influenced the alcohol, cigarette, and marijuana use of not only their own adolescent children but also of members of their adolescents' friendship groups. Method: Analyses of friendship nominations within each of two successive ninth-grade cohorts in 27 Iowa and Pennsylvania schools (N = 7,439 students, 53.6% female) were used to identify 897 friendship groups. Hierarchical logistic regression models were used to examine prospective associations between 9th-grade friendship group-level parenting behaviors and adolescent self-reported alcohol, cigarette, and marijuana use in 10th grade. Results: Adolescent substance use in 10th grade was significantly related to parenting behaviors of friends' parents, after controlling for adolescents' reports of their own substance use and their own parents' behaviors at the 9th grade level. These associations were particularly strong for parents' knowledge about their children and use of inconsistent discipline strategies. Significant interaction effects indicated that these relationships were strongest when adolescents received positive parenting at home. Some, but not all, of the main effects of friends' parents' parenting became nonsignificant after friends' substance use in ninth grade was included in the model. Conclusions: The findings suggest that the parenting style in adolescents' friends' homes plays an important role in determining adolescent substance use. Implications of the joint contribution of parents and peers for prevention and intervention are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Parenting Skills](#)
[*Parenting Style](#)
[*Peers](#)

Source: PsycINFO

48. Advancing Recovery: Implementing evidence-based treatment for substance use disorders at the systems level.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(413-422), 1937-1888;1938-4114 (May 2012)

Author(s): Schmidt, Laura A; Rieckmann, Traci; Abraham, Amanda; Molfenter, Todd; Capoccia, Victor; Roman, Paul; Gustafson, David H; McCarty, Dennis

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Language:

English

Abstract:

Objective: A multisite evaluation examined the process and outcomes of Advancing Recovery, a Robert Wood Johnson Foundation initiative to overcome barriers to implementing evidence-based treatments within alcohol and drug treatment systems. **Method:** We report findings from a 3-year, mixed-method study of how treatment systems promoted two evidence-based practices: medication-assisted treatment and continuing care management. We compared outcomes and implementation strategies across 12 state/county agencies responsible for alcohol and drug treatment and their selected treatment centers. Each partnership received 2 years of financial and technical support to increase adoption of evidence-based treatments. **Results:** Partnerships flexibly applied the Advancing Recovery model to promote the adoption of evidence-based treatments. Most sites achieved a measurable increase in the numbers of patients served with evidence-based practices, up from a baseline of virtually no use. Rates of adopting medication-based treatments were higher than those for continuing care management. Partnerships used a menu of top-down and bottom-up strategies that varied in specifics across sites but shared a general process of incremental testing and piecemeal adaptation. **Conclusions:** Supported partnerships between providers and policymakers can achieve wider adoption of evidence based treatment practices. Systems change unfolds through a trial-and error process of adaptation and political learning that is unique to each treatment system. This leads to considerable state and local variation in implementation strategies and outcomes. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Drug Abuse
 *Drug Rehabilitation
 *Evidence Based Practice
 *Treatment Outcomes

Source:

PsycINFO

49. Examining explanatory mechanisms of the effects of early alcohol use on young adult alcohol dependence.**Citation:**

Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(379-390), 1937-1888;1938-4114 (May 2012)

Author(s):

Guttmanova, Katarina; Hill, Karl G; Bailey, Jennifer A; Lee, Jungeun Olivia; Hartigan, Lacey A; Hawkins, J. David; Catalano, Richard F

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Institution:

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Language:

English

Abstract: Objective: This study examined potential explanatory mechanisms linking childhood alcohol use onset and chronicity of adult alcohol dependence by testing the following three competing hypotheses: (1) a marker hypothesis, where early onset of alcohol use may be simply a marker for other factors that have been linked to both age at initiation and adult alcohol problems; (2) a compromised development hypothesis, where early alcohol initiation may interfere with adolescent development, which can lead to later alcohol problems; and (3) an increased substance use hypothesis, where early onset of alcohol use may lead to increased substance use in adolescence and, in turn, chronic alcohol dependence. Method: Data came from a longitudinal community sample of 808 participants recruited at age 10 in 1985. Participants were followed through age 33 in 2008 with 92% retention. Results: Childhood onset of alcohol use (before age 11), when compared with initiation during adolescence, predicted an increased chronicity of adult alcohol dependence, even after accounting for the hypothesized confounds from the marker hypothesis. In addition, adolescent compromised functioning did not mediate this relationship between early alcohol use and chronicity of adult dependence (Hypothesis 2), nor did adolescent substance use (Hypothesis 3). However, compromised functioning and substance use in adolescence predicted increased chronicity of alcohol dependence in young adulthood. Conclusions: Prevention efforts as early as the elementary grades should focus on delaying the onset of alcohol use and reducing substance use in adolescence as well as improving school functioning, reducing adolescent problem behaviors, and targeting adolescent peer networks. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Drinking Patterns](#)
[*Alcoholism](#)
[*Chronicity \(Disorders\)](#)
[*Onset \(Disorders\)](#)

Source: PsycINFO

50. Relationship of substance abuse to dependence in the U.S. general population.

Citation: Journal of Studies on Alcohol and Drugs, May 2012, vol./is. 73/3(368-378), 1937-1888;1938-4114 (May 2012)

Author(s): Saha, Tulshi D; Harford, Thomas; Goldstein, Rise B; Kerridge, Bradley T; Hasin, Deborah

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Language: English

Abstract: Objective: The diagnostic categories of the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, for substance abuse and dependence are commonly used in clinical work and research studies, but whether abuse and dependence represent two different syndromes has been debated. The purpose of this article is to investigate the relationship of substance abuse and dependence for cannabis, cocaine, stimulants and sedatives among lifetime users of these substances in the National Epidemiologic Survey on Alcohol and Related Conditions, a nationally representative survey conducted in

2001-2002. Method: The multiple indicators multiple causes (MIMIC) model addresses three sets of relationships: those between (1) diagnostic criteria and latent factors, (2) latent factors and covariates, and (3) criteria and covariates. This approach allows for the detection of and compensation for noninvariance of the measurement of criteria across subgroups. Results: Compared with one-factor models, two-factor models (factors roughly corresponding to abuse and dependence) fit significantly better across all substances, with abuse and dependence factors highly correlated. The MIMIC model indicated that race/ethnicity, age, income, and marital status showed some differential relationships across substance groups, although most covariates showed similar associations to dependence and abuse factors. Noninvariance of criteria measurement by demographic covariates was most pronounced for cannabis abuse and dependence criteria. Conclusions: The general relationship of abuse to dependence was consistent across substances. Results were equivocal on the value of retaining separate factors; therefore, investigating the relationships of specific genetic variants and treatment outcomes to dimensional indicators of abuse, dependence, and measures combining these criteria is warranted. Measurement of cannabis abuse and dependence criteria appears most affected by demographic characteristics. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Dependency](#)
[Cannabis](#)
[CNS Stimulating Drugs](#)
[Cocaine](#)
[Sedatives](#)

Source: PsycINFO

51. " Association between alcohol screening results and hospitalizations for trauma in veteran affairs." Erratum.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(370), 0095-2990;1097-9891 (Jul 2012)

Author(s): Williams, Emily C; Bryson, Chris L; Sun, Haili; Chew, Ryan B; Chew, Lisa D; Blough, David K; Au, David H; Bradley, Katharine A

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Language: English

Abstract: Reports an error in "Association between alcohol screening results and hospitalizations for trauma in veterans affairs outpatients" by Emily C. Williams, Chris L. Bryson, Haili Sun, Ryan B. Chew, Lisa D. Chew, David K. Blough, David H. Au and Katharine A. Bradley (The American Journal of Drug and Alcohol Abuse, 2012[Jan], Vol 38[1], 73-80). In The American Journal of Drug and Alcohol Abuse, Vol. 38, Issue 1, an error has been brought to our attention. The estimate in the very bottom right-hand corner of Table 3 currently reads 2.29 (1.13-6.64) while it should read 2.29 (1.13-4.64). Informa Healthcare would like to apologize for this error. (The following abstract of the original article appeared in record 2012-04990-011). Background: Alcohol consumption is a risk

factor for traumatic injury, but it is unknown whether responses to alcohol screening questionnaires administered routinely in primary care are associated with subsequent hospitalization for traumatic injury. Objective: We evaluated the association between alcohol screening scores and the risk for subsequent hospitalizations for trauma among Veterans Affairs (VA) general medicine patients. Method: This study included VA outpatients (n = 32,623) at seven sites who returned mailed surveys (1997-1999). Alcohol Use Disorders Identification Test Consumption (AUDIT-C) scores grouped patients into six drinking categories representing nondrinkers, screen-negative drinkers, and drinkers who screened positive for mild, moderate, severe, and very severe alcohol misuse (scores 0, 1-3, 4-5, 6-7, 8-9, 10-12, respectively). VA administrative and Medicare data identified primary discharge diagnoses for trauma. Cox proportional hazard models were used to estimate the risk of trauma-related hospitalization for each drinking group adjusted for demographics, smoking, and comorbidity. Results: Compared with screen-negative drinkers, patients with severe and very severe alcohol misuse (AUDIT-C 8-9 and ≥ 10) were at significantly increased risk for trauma-related hospitalization over the follow-up period (adjusted hazard ratios AUDIT-C: 8-9 2.06, 95% confidence interval (CI) 1.31-3.24 and AUDIT-C ≥ 10 2.13, 95% CI 1.32-3.42). Conclusions: Patients with severe and very severe alcohol misuse had a twofold increased risk of hospital admission for trauma compared to drinkers without alcohol misuse. Scientific Significance: Alcohol screening scores could be used to provide feedback to patients regarding risk of trauma-related hospitalization. Findings could be used by providers during brief alcohol-related interventions with patients with alcohol misuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Hospitalization](#)
[*Military Veterans](#)
[*Risk Factors](#)
[*Trauma](#)
[Screening](#)

Source: PsycINFO

52. Computerized assessment facilitates disclosure of sensitive HIV risk behaviors among African Americans entering substance abuse treatment.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(365-369), 0095-2990;1097-9891 (Jul 2012)

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Language: English

Abstract: Background: Individuals entering substance abuse treatment are at elevated risk for HIV infection, and clinicians must generally rely on patient self-report to gauge their involvement in risk behaviors. Strategies to improve accurate reporting of personally sensitive or stigmatizing risk behaviors are needed. Objective: This study compared computerized and face-to-face interview methods in eliciting self-disclosure of HIV risk behaviors among a high-risk sample of urban African Americans entering substance abuse treatment (N = 146). Methods: Participants completed a standardized HIV risk behavior screening as a face-to-face interview. Several days later, the same participants completed a computerized self-interview with the same measure, covering the same time frame. Results: Disclosure rates for many sensitive risk behaviors were considerably higher on the computerized interview. Participants had significantly higher odds of disclosure on the computerized interview compared to the face-to-face interview on 2 of 6 drug risk behaviors examined (ORs between 2.75 and 3.15) and 9 of 13 sex risk behaviors examined (ORs between 1.60 and 6.45). The advantage of the computerized interview

was most evident for highly stigmatized behaviors, such as unprotected sex with someone other than a spouse or main partner (OR = 3.93; $p < .001$), unprotected sex during a commercial sex transaction (OR = 5.63; $p < .001$), unprotected anal sex (OR = 6.45; $p < .001$), and using unsterilized syringes (OR = 3.15; $p < .05$). Conclusions and scientific significance: Findings support the utility of computerized risk behavior assessment with African Americans entering substance abuse treatment. Computerized assessment of HIV risk behaviors may be clinically useful in substance abuse treatment and other healthcare venues serving high-risk populations. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Self Disclosure](#)
[*Sexual Risk Taking](#)
[Blacks](#)
[HIV](#)

Source: PsycINFO

53. Motives and simultaneous sedative-alcohol use among past 12-month alcohol and nonmedical sedative users.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(359-364), 0095-2990;1097-9891 (Jul 2012)

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Language: English

Abstract: Background: Simultaneous sedative-alcohol use (SSAU) is a matter of public health concern. It is important to address the various motives individuals may have for involvement in SSAU. Objective: To explore the motives associated with SSAU. Methods: Data were collected as part of the ongoing Prescription Drug Misuse, Abuse, and Dependence study in St. Louis. For this analysis, the sample included 173 participants who reported nonmedical sedative use for more than 5 days, and use of alcohol, in the past 12 months. SSAU was defined as past 12-month use of sedatives and alcohol together/at the same time. Results: Past 12-month SSAU was reported by 61% of the sample. Multivariate logistic regression indicated that for every increment of one motive, participants were significantly more likely to report SSAU (adjusted odds ratio (aOR): 1.30; 95% confidence interval (CI): 1.12-1.52). Furthermore, reporting sedative use "to get high, to change mood, to relieve stress, to party, and 'just because' " was independently associated with the past 12-month SSAU. Past 12-month SSAU was also found to be significantly associated with simultaneous use of sedatives and cannabis in the past 12 months. Conclusion: A higher number of motives, as well as specific motives reported for sedative use, were found to be significantly associated with past 12-month SSAU. Scientific significance: Findings underscore the need for considering motives in tailoring preventive interventions for reducing SSAU. It may be equally important to direct efforts toward decreasing the number of motives, as well as addressing the specific motives reported for sedative use. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohols
 *Drug Abuse
 *Motivation
 *Sedatives
Source: PsycINFO

54. Depression as a mediator of the association between substance abuse and negative parenting of fathers.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(344-349), 0095-2990;1097-9891 (Jul 2012)
Author(s): Stover, Carla Smith; Urdahl, Anna; Easton, Caroline
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Language: English
Abstract: Objective: The role of substance abuse (SA) and depression on paternal parenting has recently gained attention in the research literature. Both SA and depression have been associated with negative parenting in fathers, but studies to date have not examined the mediating role that depression may play in the association of SA and fathering. Methods: SA, depression, and parenting data were reported by 87 fathers presenting for SA evaluation. Bootstrap mediation modeling was conducted to determine the role of depression on the association between SA and negative parenting. Results: Depression is a significant mediator of the relationship between the severity of fathers' drug use and hostile-aggressive parenting behaviors. Fathers who had concerns about parenting or wanted help to improve the parent-child relationship had significantly higher symptoms of depression. Conclusions: Depressive symptoms in fathers entering SA treatment have implications for both the severity of drug abuse and negative parenting behaviors. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
 *Fathers
 *Parenting
Source: PsycINFO

55. Drug interactions between common illicit drugs and prescription therapies.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(334-343), 0095-2990;1097-9891 (Jul 2012)
Author(s): Lindsey, Wesley T; Stewart, David; Childress, Darrell
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Language: English

Abstract: Objective: The aim was to summarize the clinical literature on interactions between common illicit drugs and prescription therapies. Methods: Medline, Iowa Drug Information Service, International Pharmaceutical Abstracts, EBSCO Academic Search Premier, and Google Scholar were searched from date of origin of database to March 2011. Search terms were cocaine, marijuana, cannabis, methamphetamine, amphetamine, ecstasy, N-methyl-3,4-methylenedioxymethamphetamine, methylenedioxymethamphetamine, heroin, gamma-hydroxybutyrate, sodium oxybate, and combined with interactions, drug interactions, and drug-drug interactions. This review focuses on established clinical evidence. All applicable full-text English language articles and abstracts found were evaluated and included in the review as appropriate. Results: The interactions of illicit drugs with prescription therapies have the ability to potentiate or attenuate the effects of both the illicit agent and/or the prescription therapeutic agent, which can lead to toxic effects or a reduction in the prescription agent's therapeutic activity. Most texts and databases focus on theoretical or probable interactions due to the kinetic properties of the drugs and do not fully explore the pharmacodynamic and clinical implications of these interactions. Clinical trials with coadministration of illicit drugs and prescription drugs are discussed along with case reports that demonstrate a potential interaction between agents. The illicit drugs discussed are cocaine, marijuana, amphetamines, methylenedioxymethamphetamine, heroin, and sodium oxybate. Conclusion: Although the use of illicit drugs is widespread, there are little experimental or clinical data regarding the effects of these agents on common prescription therapies. Scientific Significance: Potential drug interactions between illicit drugs and prescription drugs are described and evaluated on the Drug Interaction Probability Scale by Horn and Hansten. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Interactions](#)
[*Drug Therapy](#)
[*Drugs](#)
[*Prescription Drugs](#)

Source: PsycINFO

56. HIV sex-risk behaviors among in- versus out-of-treatment heroin-addicted adults.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(328-333), 0095-2990;1097-9891 (Jul 2012)

Author(s): Mitchell, Shannon Gwin; Kelly, Sharon M; Brown, Barry S; O'Grady, Kevin E; Schwartz, Robert P

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Language: English

Abstract: Background: Relatively limited empirical evidence exists comparing the impact on HIV sex risk behavior for patients admitted to methadone treatment programs (MTPs) as compared with nontreatment seekers. Methods: This longitudinal cohort study examined HIV sex-risk behavior among 164 out-of-treatment heroin-dependent adults recruited from the street and 351 newly admitted MTP patients. The AIDS Risk Assessment was administered at baseline, 6 months, and 12 months. Generalized linear mixed model and generalized estimating equation analyses were used to examine the changes in sex risk behavior over time. Results: The participants mean age was 41.5 years, 74.8% were

African-American, 24.3% were White, and 54.4% were men. There were no significant differences between the groups in age, race, or gender. At baseline, the out-of-treatment group compared with the in-treatment group reported more sex partners ($p < .001$) and higher frequency of sex ($p = .001$). There was a group x time interaction for three of the sex-risk items and the out-of-treatment group reported having significantly more sex partners at both follow-up time points and having significantly more frequent unprotected sex while high at 6 months (all values of $p < .01$). Conclusions: Nontreatment seekers are at higher HIV risk than those entering MTPs and should be a focus of sex-risk reduction interventions, even if they are not interested in treatment at that time. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Heroin Addiction](#)
[*Sexual Risk Taking](#)
[*Risk Assessment](#)
[HIV](#)

Source: PsycINFO

57. Psychiatric medication-seeking beliefs and behaviors among college students.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(314-321), 0095-2990;1097-9891 (Jul 2012)

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Language: English

Abstract: Background: Misuse of prescription psychiatric medications is increasing on college campuses. Sources of medications include friends or family, obtaining prescriptions fraudulently or from multiple physicians, and buying drugs online. Objective: This study assessed psychosocial correlates of medication-seeking behaviors in college students to identify characteristics of potential prescription drug misusers. Methods: The sample included 383 participants (59.2% female) recruited from various campus locations and online classes of a Division I university in the southeastern region of the United States, with an enrollment of approximately 50,000 students. Participants anonymously completed self-report questionnaires. Results: Misusers of prescription psychiatric medication were more likely to have health insurance and to know someone else who had misused that medication. They were more likely to endorse positive attitudes regarding medication-seeking. There was a significant correlation between positive medication-seeking beliefs and reported medication-seeking behaviors. The most common and most accepted form of medication-seeking was asking for the medication from a peer. Conclusions: Results suggest the need for further education regarding the dangers of psychiatric medication-seeking, particularly related to seeking medication from peers. Scientific Significance: This study is the first to assess psychosocial characteristics of college students who seek prescription psychiatric medications for misuse. The information obtained may be used for risk assessment and preventive efforts. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*College Students](#)
[*Drug Abuse](#)
[*Drug Therapy](#)

*Prescription Drugs
*Psychosocial Factors

Source: PsycINFO

58. The level of alexithymia in Alcohol-Dependent patients does not influence outcomes after inpatient treatment.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(299-304), 0095-2990;1097-9891 (Jul 2012)

Author(s): de Haan, Hein A; Schellekens, Arnt F. A; van der Palen, Job; Verkes, Robbert-Jan; Buitelaar, Jan K; De Jong, Cor A. J

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Language: English

Abstract: Background: The inability of individuals with Alcohol Use Disorders (AUD) to recognize and describe their feelings and cravings may be due to alexithymia. Previous researches have shown evidence for a negative influence of alexithymia on treatment outcomes in patients with AUD. Therefore, it was hypothesized that high alexithymic patients with AUD would benefit less from cognitive behavioral therapy (CBT) compared with low alexithymic patients. Methods: One hundred alcohol-dependent inpatients (DSM IV) were assessed with the Mini International Neuropsychiatric Interview for psychiatric disorders, the Toronto Alexithymia Scale (TAS-20), and the European Addiction Severity Index (EuropASI). Baseline alexithymia, as a categorical and continuous variable, was used to compare or relate baseline demographic and addiction characteristics, time in treatment, abstinence, and differences in addiction severity at 1-year follow-up. Analyses were performed using 2 test, analysis of variance or Kruskal-Wallis, paired t-tests or Wilcoxon's signed rank tests, multivariate logistic, and linear regression models, as appropriate. Results: The prevalence of high alexithymia (TAS-20 > 61) was 45%. The total TAS-20 score correlated negatively with years of education ($r = -.21$; $p = .04$) and positively with the psychiatry domain of the EuropASI ($r = .23$; $p = .04$). Alexithymia showed no relation to abstinence, time in treatment, or change in severity of alcohol-related problems on the EuropASI. Conclusion: High alexithymic patients with AUD do benefit equally from inpatient CBT-like treatment as low alexithymic patients with AUD. Scientific significance: Multimethod alexithymia assessments with an observer scale have been advised to judge the relationship with resulting outcome in CBT. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Alexithymia
*Cognitive Behavior Therapy
*Treatment Outcomes
Patients

Source: PsycINFO

59. Advancing interpersonal therapy for substance use disorders.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(293-298), 0095-2990;1097-9891 (Jul 2012)

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Language: English

Abstract: Background and aims: Interpersonal psychotherapy (IPT) for substance use disorders has received little research attention over the past two decades, despite a suggested adaptation for substance use treatment. This article explores the potential reasons for the limited attention and suggests further adaptations that have the potential to increase the usefulness of IPT in treating substance use. The goal of this exploration is to renew interest in the use of IPT for substance use disorders and spark research to assess this type of intervention. Materials and methods: First, the published literature on the use of IPT for treating substance abuse is reviewed. Subsequently, substance use research commenting on the relational aspects of substance abuse is examined and used in order to develop and support suggested adaptations to IPT for substance abuse treatment. Results: Suggested adaptations include incorporating relational elements from motivational interviewing, focusing on the importance of developing meaningful roles in society, encouraging social bonding with non-users, and using the therapeutic relationship to develop the capacity to self-soothe. Conclusions and Scientific Significance: It is expected that the suggested adaptations for IPT will enable IPT treatment to be more effective. Scientific evaluation of IPT for substance abuse is encouraged with the adoption of these proposed adaptations. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Interpersonal Psychotherapy](#)
[*Motivational Interviewing](#)

Source: PsycINFO

60. Substance use disorder prevalence among female state prison inmates.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(278-285), 0095-2990;1097-9891 (Jul 2012)

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Language: English

Abstract: Background: Substance use disorders (SUDs) are prevalent among female inmates. As the female state prison population continues to increase, describing the specific clinical and demographic characteristics of female prisoners remains of paramount importance to better define women's needs in the state prison system. Objectives: To determine the prevalence and patterns of current DSM-IV SUDs and explore whether particular demographic characteristics are more strongly associated with specific SUD categories. Methods: Data were derived from routine clinical assessments of 801 female inmates incarcerated in the Minnesota Department of Corrections state prison system. The Substance Use Disorder Diagnostic Schedule-IV (Hoffmann NG, Harrison PA. SUDDS-IV: Substance Use Disorder Diagnostic Schedule-IV. Smithfield, RI: Evince Clinical Assessments, 1995) was administered to all inmates as a computer-prompted interview on admission to the prison. Results: Of the inmates, 70.0% were dependent on at least one substance, and 7.9% met criteria for substance abuse. Alcohol dependence (30.2%) and cocaine dependence (30.1%) were the two most prevalent SUDs. The

remaining substance dependence diagnoses that predominated were as follows: stimulant dependence, 24.1%; marijuana dependence, 15.6%; and heroin dependence, 9.6%. Over half (56.9%) were dependent on a substance other than alcohol. Prevalence of cocaine dependence [odds ratio (OR) = 2.83, 95% confidence interval (CI) = 1.92-4.16] was significantly higher among African Americans, whereas prevalence of stimulant dependence (OR = 9.24, 95% CI = 5.40-15.80) was significantly higher among Caucasians. Prevalence of alcohol (OR = 2.12, 95% CI = 1.38-3.25) and heroin (OR = 2.67, 95% CI = 1.50-4.77) dependence was significantly higher among Native Americans. Conclusions and Scientific Significance: SUDs in general, and illicit drug use disorders in particular, are prevalent among female inmates entering a state prison system. Membership to a particular ethnic group may identify a set of inmates at elevated risk for the presence of substance-specific dependence diagnoses. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Demographic Characteristics](#)
[*Drug Abuse](#)
[*Epidemiology](#)
[*Prisoners](#)
[Human Females](#)

Source: PsycINFO

61. The substance use among forensic psychiatric patients.

Citation: The American Journal of Drug and Alcohol Abuse, July 2012, vol./is. 38/4(273-277), 0095-2990;1097-9891 (Jul 2012)

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Language: English

Abstract: Objectives: The primary goal of this study was to examine the relative differences in the use of illegal substances (i.e., amphetamine, cannabis, opiates) among forensic patients who have committed a violent crime compared with the general population. The aim was also to find out if there were differences in substance use among forensic versus nonforensic patients with psychosis diagnosis. Methods: The study population consisted of 190 persons, who were involuntarily ordered to hospital treatment as forensic patients in Finland. The information was compared with data from the national hospital discharge register. These results were also compared with national statistics from the general population. Results: Among forensic patients, the lifetime prevalence of cannabis use was 2-fold, amphetamine use 40-fold, and opiate use over 60-fold higher than estimated from the general population in Finland. Cannabis use was 1.5-fold more common than amphetamine use among forensic patients and 1.3-fold more common among nonforensic patients. The prevalences of cannabis-related diagnoses were 4.7- and 3.7-fold more common than opiate use among forensic and nonforensic patients, respectively. Conclusions: Cannabis, amphetamine, and opiate use are associated with an increased risk of becoming a forensic psychiatric patient, but no substantial differences were observed among patients with psychosis diagnosis in the relative risk increase for cannabis versus amphetamine versus opiate use, indicating that none of these drugs are uniquely associated with violent offending among mentally ill. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Diagnosis](#)
[*Drug Abuse](#)
[*Psychiatric Patients](#)
[*Psychosis](#)
[*Violent Crime](#)
[Forensic Psychiatry](#)
[Patients](#)

Source: PsycINFO

62. Cumulative adversity and smaller gray matter volume in medial prefrontal, anterior cingulate, and insula regions.

Citation: Biological Psychiatry, July 2012, vol./is. 72/1(57-64), 0006-3223 (Jul 1, 2012)

Author(s): Ansell, Emily B; Rando, Kenneth; Tuit, Keri; Guarnaccia, Joseph; Sinha, Rajita

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Institution: Ansell, Emily B.: Department of Psychiatry, Yale University School of Medicine, New Haven, CT; Rando, Kenneth: Department of Psychiatry, Yale University School of Medicine, New Haven, CT; Tuit, Keri: Department of Psychiatry, Yale University School of Medicine, New Haven, CT; Guarnaccia, Joseph: Department of Neurology, Yale University School of Medicine, New Haven, CT; Sinha, Rajita: Department of Psychiatry, Yale University School of Medicine, New Haven, CT

Language: English

Abstract: Background: Cumulative adversity and stress are associated with risk of psychiatric disorders. While basic science studies show repeated and chronic stress effects on prefrontal and limbic neurons, human studies examining cumulative stress and effects on brain morphology are rare. Thus, we assessed whether cumulative adversity is associated with differences in gray matter volume, particularly in regions regulating emotion, self-control, and top-down processing in a community sample. Methods: One hundred three healthy community participants, aged 18 to 48 and 68% male, completed interview assessment of cumulative adversity and a structural magnetic resonance imaging protocol. Whole-brain voxel-based-morphometry analysis was performed adjusting for age, gender, and total intracranial volume. Results: Cumulative adversity was associated with smaller volume in medial prefrontal cortex (PFC), insular cortex, and subgenual anterior cingulate regions (familywise error corrected, $p < .001$). Recent stressful life events were associated with smaller volume in two clusters: the medial PFC and the right insula. Life trauma was associated with smaller volume in the medial PFC, anterior cingulate, and subgenual regions. The interaction of greater subjective chronic stress and greater cumulative life events was associated with smaller volume in the orbitofrontal cortex, insula, and anterior and subgenual cingulate regions. Conclusions: Current results demonstrate that increasing cumulative exposure to adverse life events is associated with smaller gray matter volume in key prefrontal and limbic regions involved in stress, emotion and reward regulation, and impulse control. These differences found in community participants may serve to mediate vulnerability to depression, addiction, and other stress-related psychopathology. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society of Biological Psychiatry; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Chronic Stress](#)
[*Mental Disorders](#)
[*Prefrontal Cortex](#)
[*Gray Matter](#)
[*Cingulate Cortex](#)
[Insula](#)

Source: PsycINFO

63. Parental substance use impairment, parenting and substance use disorder risk.

Citation: Journal of Substance Abuse Treatment, July 2012, vol./is. 43/1(114-122), 0740-5472 (Jul 2012)

Author(s): Arria, Amelia M; Mericle, Amy A; Meyers, Kathleen; Winters, Ken C

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Institution: Arria, Amelia M.: Treatment Research Institute, Philadelphia, PA; Mericle, Amy A.: Treatment Research Institute, Philadelphia, PA; Meyers, Kathleen: Treatment Research Institute, Philadelphia, PA; Winters, Ken C.: Treatment Research Institute, Philadelphia, PA

Language: English

Abstract: Using data from a nationally representative sample, this study investigated substance use disorder (SUD) among respondents with ages 15-54 years as a function of their parents' substance-related impairment and parents' treatment history. In addition, associations among maternal and paternal substance-related impairment, specific parenting behaviors, and risk for SUD in the proband were examined. As expected, parental substance-related impairment was associated with SUD. Paternal treatment history was associated with a decreased risk for SUD in the proband but did not appear to be associated with positive parenting practices. Results of post hoc analyses suggested that parenting behaviors might operate differently to influence SUD risk in children where parents are affected by substance use problems compared with nonaffected families. Future research is warranted to better understand the complex relationships among parental substance use, treatment, parenting behaviors, and SUD risk in offspring. Opportunities might exist within treatment settings to improve parenting skills. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Parent Child Relations](#)
[*Risk Factors](#)
[Drug Rehabilitation](#)

Source: PsycINFO

64. Factors associated with methadone treatment among injection drug users in Bangkok, Thailand.

Citation: Journal of Substance Abuse Treatment, July 2012, vol./is. 43/1(108-113), 0740-5472 (Jul 2012)

Author(s): Fairbairn, Nadia; Hayashi, Kanna; Kaplan, Karyn; Suwannawong, Paisan; Qi, Jiezhi; Wood, Evan; Kerr, Thomas

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Language: English

Abstract: Little is known about the characteristics of injection drug users (IDU) who take methadone treatment in Thailand. We examined prevalence and correlates of methadone treatment among a community-recruited sample of IDU in Bangkok, Thailand. Among 273 participants, 143 (52.4%) reported accessing methadone treatment within the previous 6 months. Older age (adjusted odds ratio [AOR] = 1.90, 95% confidence interval [CI] = 1.10-3.30) and more than weekly midazolam injection (AOR = 1.85, 95% CI = 1.04-3.29) were positively associated, whereas alcohol use (AOR = 0.34, 95% CI = 0.18-0.63) and noninjection methamphetamine use (AOR = 0.49, 95% CI = 0.29-0.85) were negatively associated with methadone treatment. In subanalyses, 98.6% of IDU on methadone continued to inject drugs, and the most common reason for stopping methadone was becoming incarcerated (49%). Evidence-based addiction treatment in the form of methadone maintenance therapy, with attention paid to concomitant midazolam injection in this setting, should be implemented. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: International AIDS Society Conference. 2010. Vienna. Austria. A limited portion of this research was presented in abstract form at the aforementioned conference.

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Intravenous Drug Usage](#)
[*Methadone Maintenance](#)

Source: PsycINFO

65. Assessing self-determined motivation for addiction treatment: Validity of the Treatment Entry Questionnaire.

Citation: Journal of Substance Abuse Treatment, July 2012, vol./is. 43/1(70-79), 0740-5472 (Jul 2012)

Author(s): Urbanoski, Karen A; Wild, T. Cameron

Correspondence Address: Urbanoski, Karen A.: Centre for Addiction and Mental Health, T309, 33 Russell St., Toronto, ON, Canada, M5S 2S1, karen_urbanoski@camh.net

Institution: Urbanoski, Karen A.: Department of Psychiatry, Harvard University, Boston, MA; Wild, T. Cameron: School of Public Health, University of Alberta, Edmonton, AB

Language: English

Abstract: Although legal, formal, and informal social controls are frequently used to pressure individuals to enter treatment, motivational consequences of using these tactics have been neglected. Self-determination theory (SDT) provides a useful perspective for understanding client experiences of social controls and highlights the importance of self-determined motivation for long-term behavior change. This study assessed the construct validity of the Treatment Entry Questionnaire (TEQ), a brief scale derived from SDT to measure identified, introjected, and external treatment motivation. Two independent samples of clients entering Canadian residential and outpatient treatment completed TEQ items (ns = 529 and 623). Exploratory and confirmatory factor analyses supported a 9-item version of the scale, with 3 factors aligning with SDT motivational subtypes. Subscales showed high internal consistency and correlated as expected with social controls and perceived coercion at treatment entry. The TEQ-9 is a valid option for assessing self-determined motivation in clinical practice and evaluating coerced addiction treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Rehabilitation](#)
[*Motivation](#)
[*Psychometrics](#)
[*Self Determination](#)

*Test Validity
Test Reliability

Source: PsycINFO

66. Variation in substance use relapse episodes among adolescents: A longitudinal investigation.

Citation: Journal of Substance Abuse Treatment, July 2012, vol./is. 43/1(44-52), 0740-5472 (Jul 2012)

Author(s): Ramo, Danielle E; Prince, Mark A; Roesch, Scott C; Brown, Sandra A

Correspondence Address: Ramo, Danielle E.: Department of Psychiatry, University of California, San Francisco, Parnassus Avenue, Box TRC 0984, San Francisco, CA, US, 94143, danielle.ramo@ucsf.edu

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Language: English

Abstract: Substance use disorders are chronically relapsing conditions, and there is a need to evaluate whether relapse precursors are consistent across multiple relapses. We identified latent groups of relapse characteristics over time in adolescents with alcohol and substance use disorders following an inpatient treatment episode. Youth (N = 124, mean age = 16 years, 56% male, 60% Caucasian) were interviewed while in treatment and biannually during the first year after treatment to gather contextual information about first and second relapse episodes. We identified two latent classes of relapse precursors labeled aversive-social (41% at initial relapse, 57% at subsequent relapse) and positive-social (59% at initial relapse, 43% at subsequent relapse). Classes were stable in structure over time; however, only 61% of those assigned to aversive-social and 39% assigned to positive-social classes at initial relapse remained there for the subsequent relapse. Findings highlight the dynamic nature of relapse for youth and have important clinical implications. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Pathology
*Relapse (Disorders)

Source: PsycINFO

67. Integrating information on substance use disorders into electronic health record systems.

Citation: Journal of Substance Abuse Treatment, July 2012, vol./is. 43/1(12-19), 0740-5472 (Jul 2012)

Author(s): Tai, Betty; McLellan, A. Thomas

Correspondence Address: Tai, Betty: Clinical Trials Network, National Institute on Drug Abuse, National Institutes of Health, Bethesda, MD, US, btai@nida.nih.gov

Institution: Tai, Betty: Clinical Trials Network, National Institute on Drug Abuse, National Institutes of Health, Bethesda, MD; McLellan, A. Thomas: Penn Center for Substance Abuse Solutions, University of Pennsylvania School of Medicine, Philadelphia, PA

Language: English

Abstract: For reasons of safety and effectiveness, many forces in health care, especially the Affordable Care Act of 2010, are pressing for improved identification and management of substance use disorders within mainstream health care. Thus, standard information about patient substance use will have to be collected and used by providers within electronic

health record systems (EHRS). Although there are many important technical, legal, and patient confidentiality issues that must be dealt with to achieve integration, this article focuses upon efforts by the National Institute on Drug Abuse and other federal agencies to develop a common set of core questions to screen, diagnose, and initiate treatment for substance use disorders as part of national EHRS. This article discusses the background and rationale for these efforts and presents the work to date to identify the questions and to promote information sharing among health care providers. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Information](#)
[*Internet](#)
[*Medical Records](#)

Source: PsycINFO

68. Meta-analyses of seven of the National National Institute on Drug Abuse's principles of drug addiction treatment.

Citation: Journal of Substance Abuse Treatment, July 2012, vol./is. 43/1(1-11), 0740-5472 (Jul 2012)

Author(s): Pearson, Frank S; Prendergast, Michael L; Podus, Deborah; Vazan, Peter; Greenwell, Lisa; Hamilton, Zachary

Correspondence Address: Pearson, Frank S.: National Development and Research Institutes, Inc., New York, NY, US, 10010-3509, pearsonfs@verizon.net

Institution: Pearson, Frank S.: National Development and Research Institutes Inc., New York, NY; Prendergast, Michael L.: UCLA, Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, Los Angeles, CA; Podus, Deborah: UCLA, Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, Los Angeles, CA; Vazan, Peter: National Development and Research Institutes Inc., New York, NY; Greenwell, Lisa: RMC Research Corporation, Portland, OR; Hamilton, Zachary: Department of Criminal Justice and Criminology, Washington State University, Pullman, WA

Language: English

Abstract: Of the 13 principles of drug addiction treatment disseminated by the National Institute on Drug Abuse (NIDA), 7 were meta-analyzed as part of the Evidence-based Principles of Treatment (EPT) project. By averaging outcomes over the diverse programs included in the EPT, we found that 5 of the NIDA principles examined are supported: matching treatment to the client's needs, attending to the multiple needs of clients, behavioral counseling interventions, treatment plan reassessment, and counseling to reduce risk of HIV. Two of the NIDA principles are not supported: remaining in treatment for an adequate period and frequency of testing for drug use. These weak effects could be the result of the principles being stated too generally to apply to the diverse interventions and programs that exist or unmeasured moderator variables being confounded with the moderators that measured the principles. Meta-analysis should be a standard tool for developing principles of effective treatment for substance use disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Rehabilitation](#)
[*Evidence Based Practice](#)
[*Treatment Guidelines](#)
[Health Maintenance Organizations](#)

Source: PsycINFO

69. Striatal dopamine in bulimia nervosa: A PET imaging study.

Citation: International Journal of Eating Disorders, July 2012, vol./is. 45/5(648-656), 0276-3478;1098-108X (Jul 2012)

Author(s): Broft, Allegra; Shingleton, Rebecca; Kaufman, Jenna; Liu, Fei; Kumar, Dileep; Slifstein, Mark; Abi-Dargham, Anissa; Schebendach, Janet; Van Heertum, Ronald; Attia, Evelyn; Martinez, Diana; Walsh, B. Timothy

Correspondence Address: Broft, Allegra: Eating Disorders Research Unit, Department of Psychiatry, Columbia University, 1051 Riverside Drive, Unit 98, New York, NY, US, 10032, aib8@columbia.edu

Institution: Broft, Allegra: Columbia College of Physicians and Surgeons, New York, NY; Shingleton, Rebecca: Columbia College of Physicians and Surgeons, New York, NY; Kaufman, Jenna: Columbia College of Physicians and Surgeons, New York, NY; Liu, Fei: Columbia College of Physicians and Surgeons, New York, NY; Kumar, Dileep: Columbia College of Physicians and Surgeons, New York, NY; Slifstein, Mark: Columbia College of Physicians and Surgeons, New York, NY; Abi-Dargham, Anissa: Columbia College of Physicians and Surgeons, New York, NY; Schebendach, Janet: Columbia College of Physicians and Surgeons, New York, NY; Van Heertum, Ronald: Columbia College of Physicians and Surgeons, New York, NY; Attia, Evelyn: Columbia College of Physicians and Surgeons, New York, NY; Martinez, Diana: Columbia College of Physicians and Surgeons, New York, NY; Walsh, B. Timothy: Columbia College of Physicians and Surgeons, New York, NY

Language: English

Abstract: Objective: Bulimia nervosa (BN) has been characterized as similar to an addiction, though the empirical support for this characterization is limited. This study utilized PET imaging to determine whether abnormalities in brain dopamine (DA) similar to those described in substance use disorders occur in BN. Method: PET imaging with [¹⁸F] raclopride, pre/post methylphenidate administration, to assess dopamine type 2 (D2) receptor binding (BPND) and striatal DA release (BPND). Results: There was a trend toward lower D2 receptor BPND in two striatal subregions in the patient group when compared with the control group. DA release in the putamen in the patient group was significantly reduced and, overall, there was a trend toward a difference in striatal DA release. Striatal DA release was significantly associated with the frequency of binge eating. Discussion: These data suggest that BN is characterized by abnormalities in brain DA that resemble, in some ways, those described in addictive disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Wiley Periodicals, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Brain](#)
[*Bulimia](#)
[*Dopamine](#)
[*Drug Addiction](#)

Source: PsycINFO

70. Evolution of concept, but not action, in addiction treatment.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(1041-1048), 1082-6084;1532-2491 (Jun 2012)

Author(s): Arria, Amelia M; McLellan, A. Thomas

Correspondence Address: Arria, Amelia M.: Center on Young Adult Health and Development, 1142 School of Public Health Building, College Park, MD, US, 20742, aarria@umd.edu

Institution: Arria, Amelia M.: Center on Young Adult Health and Development, Department of Family Science, University of Maryland School of Public Health, College Park, MD; McLellan, A. Thomas: Treatment Research Institute, Philadelphia, PA

Language: English

Abstract: The Western approach to addiction treatment involves a medical or disease orientation to understanding the onset, course, and management of addiction, and a clinical goal of abstinence or very significant reductions in drug use, usually with a combination of behavioral and pharmacological interventions. Even within this Western approach, and despite several consensually accepted features of addiction, a significant mismatch remains between what this culture has come to accept as the nature of the disease and how that same culture continues to treat the disease. This paper discusses the evolution of these Western concepts over the past decade without a corresponding evolution in the nature, duration, or evaluation standards for addiction treatment. Here, we take the position that continuing care and adaptive treatment protocols, combining behavioral therapies, family and social supports, and, where needed, medications show much promise to address the typically chronic, relapsing, and heterogeneous nature of most cases of serious addiction. By extension, methods to evaluate effectiveness of addiction treatment should focus upon the functional status of patients during the course of their treatment instead of post-treatment, as is the evaluation practice used with most other chronic illnesses. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Addiction](#)
[*Drug Rehabilitation](#)
[*Intervention](#)
[*Pharmacology](#)
[*Relapse \(Disorders\)](#)

Source: PsycINFO

71. The science and practice of medication-assisted treatments for opioid dependence.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(1026-1040), 1082-6084;1532-2491 (Jun 2012)

Author(s): Pecoraro, Anna; Ma, Michelle; Woody, George E

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Institution: Pecoraro, Anna: Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA; Ma, Michelle: Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA; Woody, George E.: Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA

Language: English

Abstract: This paper briefly reviews the evolution of opioid addiction treatment from humanitarian to scientific and evidence-based, the evidence bases supporting major medication-assisted treatments and adjunctive psychosocial techniques, as well as challenges faced by clinicians and treatment providers seeking to provide those treatments. Attitudes, politics, policy, and financial issues are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Drug Dependency](#)
[*Drug Therapy](#)
[*Evidence Based Practice](#)
[*Opiates](#)
[Sciences](#)

Source: PsycINFO

72. HIV/AIDS and drug use in China-Interactions, impacts, and issues.

- Citation:** Substance Use & Misuse, June 2012, vol./is. 47/8-9(1015-1025), 1082-6084;1532-2491 (Jun 2012)
- Author(s):** Zhao, Min; Ling, Walter
- Correspondence Address:** Zhao, Min: Shanghai Mental Health Center, Shanghai Jiaotong University School of Medicine, 600 South Wanping Road, Shanghai, China, 200030, drzhaomin@sh163.net
- Institution:** Zhao, Min: Shanghai Mental Health Center, Shanghai Jiaotong University School of Medicine, Shanghai; Ling, Walter: UCLA Integrated Substance Abuse Programs, Department of Psychiatry and Biobehavioral Sciences, David Geffen School of Medicine, Los Angeles, CA
- Language:** English
- Abstract:** The interrelationships of HIV/AIDS and drug use and misuse result in complex problems that have been addressed by a variety of sociolegal approaches that often are in contrast to evidence-based medical practices proven effective in reducing associated harms. Like other countries struggling to reduce the incidence and consequences of addiction and HIV/AIDS, China is working to improve systems of care and to revise policies toward drug use and misuse and HIV/AIDS. Greater interaction with researchers and clinicians from around the world can foster increased awareness of effective practices and help implement effective strategies to deal with the problems of HIV/AIDS, and addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Addiction](#)
[*AIDS](#)
[*Drug Abuse](#)
[*HIV](#)
- Source:** PsycINFO

73. Psychiatric co-morbidity and substance use disorders: Treatment in parallel systems or in one integrated system?

- Citation:** Substance Use & Misuse, June 2012, vol./is. 47/8-9(1005-1014), 1082-6084;1532-2491 (Jun 2012)
- Author(s):** Torrens, Marta; Rossi, Paola C; Martinez-Riera, Roser; Martinez-Sanvisens, Diana; Bulbena, Antoni
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- Institution:** Torrens, Marta: Institut de Neuropsiquiatria i Addiccions (INAD), Hospital del Mar-IMIM, Barcelona; Rossi, Paola C.: Institut de Neuropsiquiatria i Addiccions (INAD), Hospital del Mar-IMIM, Barcelona; Martinez-Riera, Roser: Institut de Neuropsiquiatria i Addiccions (INAD), Hospital del Mar-IMIM, Barcelona; Martinez-Sanvisens, Diana: Institut de Neuropsiquiatria i Addiccions (INAD), Hospital del Mar-IMIM, Barcelona; Bulbena, Antoni: Institut de Neuropsiquiatria i Addiccions (INAD), Hospital del Mar-IMIM, Barcelona
- Language:** English
- Abstract:** Psychiatric co-morbidity among substance users refers to the simultaneous presence of at least another psychiatric disorder in a person diagnosed with a substance use disorder. Co-morbid patients represent a substantial number of people in treatment and present greater disorder severity from both the clinical and social perspectives than those people diagnosed with only one type of disorder. We present an overview of the current state of the art concerning the choice of site of treatment, the kind of intervention, the length of such treatment, and future goals, aiming to establish a more effective intervention, and

finally so as to further improve clinical outcomes. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Comorbidity](#)
[*Drug Abuse](#)
[Treatment](#)
Source: PsycINFO

74. Illegal drugs, anti-drug policy failure, and the need for institutional reforms in Colombia.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(972-1004), 1082-6084;1532-2491 (Jun 2012)
Author(s): Thoumi, Francisco E
Correspondence Address: Thoumi, Francisco E.: Fundacion Razon Publica, Bogota, Colombia, fthoumi@gmail.com
Institution: Thoumi, Francisco E.: Fundacion Razon Publica, Bogota
Language: English
Abstract: This paper is inspired by two anomalies encountered in the study of the illegal drugs industry. First, despite the very high profits of coca/cocaine and poppy/opium/heroin production, most countries that can produce do not. Why, for example, does Colombia face much greater competition in the international coffee, banana, and other legal product markets than in cocaine? And second, though illegal drugs are clearly associated with violence, why is it that illegal drug trafficking organizations have been so much more violent in Colombia and Mexico than in the rest of the world? The answers to these questions cannot be found in factors external to Colombia (and Mexico). They require identifying the societal weaknesses of each country. To do so, the history of the illegal drugs industry is surveyed, a simple model of human behavior that stresses the conflict between formal (legal) and informal (socially accepted) norms as a source of the weaknesses that make societies vulnerable is formulated. The reasons why there is a wide gap between formal and informal norms in Colombia are explored and the effectiveness of anti-drug policies is considered to explain why they fail to achieve their posited goals. The essay ends with reflections and conclusion on the need for institutional change. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Laws](#)
[*Drug Usage](#)
[Failure](#)
Source: PsycINFO

75. Alcohol, tobacco, and prescription drugs: The relationship with illicit drugs in the treatment of substance users.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(963-971), 1082-6084;1532-2491 (Jun 2012)
Author(s): Teesson, Maree; Farrugia, Philippa; Mills, Katherine; Hall, Wayne; Baillie, Andrew
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Institution: Teesson, Maree: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW; Farrugia, Philippa: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW; Mills, Katherine: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW; Hall, Wayne: University of Queensland, Centre for Clinical Research, Brisbane, QLD; Baillie, Andrew: Department of Psychology, Centre for Emotional Health, Macquarie University, North Ryde, NSW

Language: English

Abstract: Alcohol, tobacco, prescription drug, and illicit drug use frequently co-occur. This paper reviews the extent of this co-occurrence in both general population samples and clinical samples, and its impact on treatment outcome. We argue that the research base for understanding comorbidity among tobacco, alcohol, prescription, and illicit drugs needs to be broadened. We specifically advocate for: (1) more epidemiological studies of relationships among alcohol, tobacco, and other illicit drug use; and (2) increased research on treatment options that address the problematic use of all of these drugs. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Prescription Drugs](#)
[*Tobacco Smoking](#)

Source: PsycINFO

76. Revisiting the concepts of risk and protective factors for understanding the etiology and development of substance use and substance use disorders: Implications for prevention.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(944-962), 1082-6084;1532-2491 (Jun 2012)

Author(s): Sloboda, Zili; Glantz, Meyer D; Tarter, Ralph E

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Language: English

Abstract: Over the past 20 years we have accumulated a greater knowledge and understanding of the genetic, neurobiological, and behavioral factors that may be associated with young people initiating the use of drugs and other substances and to progressing from use to abuse and dependence. This knowledge suggests that individuals may be "predisposed" to substance use disorders (SUD) and that the actual engagement in these behaviors depends on their environmental experiences from micro to macro levels. This paper summarizes this knowledge base and supports a developmental framework that examines the interaction of posited genetic, psychological, and neurobiological "predispositions" to SUD and those environmental influences that exacerbate this vulnerability. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Abuse Prevention](#)
[*Etiology](#)
[*Protective Factors](#)
[*Risk Factors](#)
[Genetics](#)
[Neurobiology](#)

Source: PsycINFO

77. Harm reduction-from a conceptual framework to practical experience: The example of Germany.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(910-922), 1082-6084;1532-2491 (Jun 2012)

Author(s): Michels, Ingo Ilja; Stover, Heino

Correspondence Address: Michels, Ingo Ilja: Office of the Federal Drug Commissioner, Federal Ministry of Health, Berlin, Germany, 10117, ingoilja.michels@giz.de

Institution: Michels, Ingo Ilja: Office of the Federal Drug Commissioner, Federal Ministry of Health, Berlin; Stover, Heino: Institute of Addiction Research, University of Applied Science, Frankfurt on Main

Language: English

Abstract: Drug demand reduction programs must be integrated into a comprehensive strategy aiming at preventing drug misuse, facilitating access to counseling, to treatment of dependence, and to rehabilitation; and establishing effective measures to reduce the adverse health and social consequences of drug misuse. The continuous and even rising spread of HIV/AIDS and other infectious diseases (e.g., hepatitis B and C) among injecting drug users is alarming. Although, in many countries the prevalence of HIV infections is decreasing due to the implementation of effective harm reduction measures, such as syringe exchange and opiate substitution treatment (OST), in other countries infections are on the rise. The lessons learnt indicate that only a comprehensive, evidence-based approach in prevention, treatment, care, and support is promising in combating the devastating effects of drug dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Drugs](#)
[*Harm Reduction](#)

Source: PsycINFO

78. Evaluation of the therapeutic community treatment model in Thailand: Policy implications for compulsory and prison-based treatment.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(889-909), 1082-6084;1532-2491 (Jun 2012)

Author(s): Johnson, Knowlton W; Young, Linda; Shamblen, Stephen; Suresh, Geetha; Browne, Thom; Chookhare, Khun Warunee

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Institution: Johnson, Knowlton W.: Pacific Institute for Research and Evaluation, Inc., Louisville Center, Louisville, KY; Young, Linda: Pacific Institute for Research and Evaluation, Inc., Louisville Center, Louisville, KY; Shamblen, Stephen: Pacific Institute for Research and Evaluation, Inc., Louisville Center, Louisville, KY; Suresh, Geetha: University of Louisville, Louisville, KY; Browne, Thom: Bureau of International Narcotics and Law Enforcement Affairs, U.S. Department of State, Washington, DC; Chookhare, Khun Warunee: CSN & Associates Co. Ltd., Bangkok

Language: English

Abstract: This study, conducted in 2005 to 2007, presents results that are based on a proscriptive cohort design. The sample consisted of 769 residents in 22 drug user treatment programs who stayed in treatment for at least 30 days to one year; 510 former residents (66%) from 21 programs (95%) were interviewed again at a 6-month post-treatment follow-up assessment. A majority of the participants were male, lived with family or relatives, had completed only primary school, and had a full-time or a part-time job prior to entering treatment. The participating therapeutic community (TC) programs were a mixture of volunteer, compulsory-probation, and prison-based programs. In-person interview data

and urine testing showed that the self-reported drug use prevalence rates are reliable. The results show large positive treatment effects on 30-day and 6-month illegal drug use and small to medium effects on the severity of alcohol use and related problems. A multilevel regression analysis suggests that residents' reduced stigma, adaptation of the TC model, and frequency of alcohol and drug use-related consequences partially predict treatment success. Study limitations and policy implications are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Prisons](#)
[*Therapeutic Community](#)
[Government Policy Making](#)
[Models](#)

Source: PsycINFO

79. Interventions, policies and evidence: Taking an experimental look at international drug control.

Citation: Substance Use & Misuse, June 2012, vol./is. 47/8-9(865-867), 1082-6084;1532-2491 (Jun 2012)

Author(s): Gerra, Gilberto; Chawla, Sandeep

Correspondence Address: Gerra, Gilberto: Drug Prevention and Health Branch, Division for Operations, United Nations Office on Drugs and Crime, P.O. Box 500, Vienna, Austria, 1400, gilberto.gerra@unodc.org

Institution: Gerra, Gilberto: Drug Prevention and Health Branch, Division for Operations, United Nations Office on Drugs and Crime, Vienna; Chawla, Sandeep: Division for Policy Analysis and Public Affairs, United Nations Office on Drugs and Crime, Vienna

Language: English

Abstract: This special edition of Substance Use and Misuse focuses on selected experiences in the following three broad areas of international drug control: 1. programs to prevent drug use, 2. services to treat drug users and help them change their behavior and sustain these pro-social changes, and 3. programs to control the supply of illicit drugs. It seeks to provide a global and historical perspective, recognizing that such wide coverage must necessarily be selective. It also seeks to transcend traditional boundaries that sometimes constitute barriers, which all too-often have become institutionalized, to needed understanding and viable interventions. Substance use disorders include a wide range of conditions, such as tobacco and alcohol abuse and dependence, illicit drug use, abuse and dependence, and the non-medical use of prescription drugs. All undermine health, well being, and social cohesion in different ways. The balance of scientific opinion is to consider substance dependence a multi-factorial health disorder affecting the brain, often following the course of a chronic disease characterized by addictive behavior. In most cases, the decision to experiment with psychoactive substances cannot be considered to be a conscious or a free choice, but is related to a combination of genetic and environmental factors contributing to a condition of psychobiological vulnerability and reducing the individual's resilience. A range of approaches to prevention and treatment as well as new challenges is discussed in this special edition of Substance Use and Misuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Informa Healthcare USA, Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Drug Laws](#)
[*Drug Rehabilitation](#)
[*Intervention](#)

Source: PsycINFO

80. Current and future treatments of obesity.

Citation: Directions in Psychiatry, 2012, vol./is. 32/1(53-63), 0891-3870 (2012)

Author(s): Shriner, Richard L; Gold, Mark S

Institution: Shriner, Richard L.: Department of Psychiatry, College of Medicine, University of Florida, Gainesville, FL; Gold, Mark S.: College of Medicine, University of Florida, Gainesville, FL

Language: English

Abstract: The incidence of obesity has increased, decade by decade, to the point that it is now a major public health and health system crisis in the United States and throughout the world. Globesity, (the global obesity epidemic), has become a vexing problem that often seems to defy rationale treatment. In this lesson, the authors suggest that an innovative study of bariatric medicine and a search for effective obesity treatments require calibrating bariatric science on three distinct levels: (1) metabolic, (2) addictive, and (3) relational. This lesson describes a rather straightforward but extensive neurometabolic and neuroendocrine map that explains the chemical pathways involved in the genesis of obesity. The fundamental processes involved in the initiation and perpetuation of food addiction is explained in detail. Its relevance to obesity and its evolution are put forth. Also discussed is how the science of food addiction plays a pivotal role in discovering meaningful obesity treatments now and in the future. Further, the authors discuss the complex intercommunication that takes place between peripheral organs, hypothalamic energy modulation, and upper level cerebral processes that ultimately contribute to food addiction and obesity. Lastly, the authors outline a research paradigm that exploits innovative discoveries in both addictive and information science that will help assist a patient population to overcome possible co localized neurometabolic and relational pathology that may contribute to a professional dysfunction called "compassion fatigue." (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Epidemics](#)
[*Obesity](#)
[*Treatment Outcomes](#)
[*Treatment](#)
[Food](#)
[Innovation](#)

Source: PsycINFO

81. Global issues on eating disorders and food addiction: Focus on China.

Citation: Directions in Psychiatry, 2012, vol./is. 32/1(41-50), 0891-3870 (2012)

Author(s): von Deneen, Karen M; Tian, Jie; Liu, Yijun

Institution: von Deneen, Karen M.: Life Sciences Research Center, School of Life Sciences and Technology, Xidian University, Xi'an; Tian, Jie: Medical Image Processing Group, Institute of Automation, Chinese Academy of Sciences, Beijing; Liu, Yijun: McKnight Brain Institute, University of Florida, Gainesville, FL

Language: English

Abstract: Obesity is a worldwide epidemic. Much research has been done on figuring out why people eat more for recreational purposes despite weight gain and other detrimental health risks. Food addiction (FA) itself is controversial for various reasons, including the lack of a proper working definition and further scientific data. However, it has been shown that FA is associated with a lowered mood and self-esteem issues, as seen in other addiction disorders, as opposed to overeating. Thus, eating disorders have been implicated in having a global impact from different perspectives. On a political scale, addictive foods

have been blamed as the cause of obesity. For example, developing countries, such as China, have been heavily affected by obesity and eating disorders. Finding effective measures that address both physiological and psychological symptoms of FA and other eating disorders is a priority in curbing the spread of obesity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Eating Disorders](#)
[*Epidemics](#)
[*Risk Factors](#)
[Chinese Cultural Groups](#)
[Developing Countries](#)
[Food](#)
[Obesity](#)

Source: PsycINFO

82. Defining food addiction and assessing its role in treatments.

Citation: Directions in Psychiatry, 2012, vol./is. 32/1(15-22), 0891-3870 (2012)

Author(s): Gearhardt, Ashley N; Yokum, Sonja

Institution: Gearhardt, Ashley N.: Yale University, New Haven, CT; Yokum, Sonja: Oregon Research Institute, Eugene, OR

Language: English

Abstract: Interest in food addiction has increased greatly due to animal model, neuroimaging, and behavioral research linking problematic eating and addictive behaviors. The Yale Food Addiction Scale (YFAS) was developed to provide an empirically validated tool to assess for signs of addictive eating behavior. Examinations of the YFAS in nonclinical and clinical samples as well as neuroimaging paradigms are reviewed. The proposed association of food addictions other clinically relevant eating problems (e.g., binge eating disorder and obesity) is outlined, and the remaining gaps in knowledge about food addiction are highlighted. Finally, authors review the possibilities for integrating addiction-focused techniques with traditional treatments for problematic eating. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Eating Behavior](#)
[*Neuroimaging](#)
[*Treatment Outcomes](#)
[*Binge Eating Disorder](#)
[Food](#)

Source: PsycINFO

83. Fostering psychologically literate citizens: A Canadian perspective.

Citation: The psychologically literate citizen: Foundations and global perspectives., 2011(234-248) (2011)

Author(s): Charlton, Steve; Lymburner, Jocelyn

Institution: Charlton, Steve: Department of Psychology, Kwantlen Polytechnic University, Richmond; Lymburner, Jocelyn: Department of Psychology, Kwantlen Polytechnic University, Surrey

Language: English

Abstract: (from the chapter) In this chapter, the authors argue that colleges and universities have a duty to offer a breadth of courses and course assignments to foster psychological literacy and ultimately the development of psychologically literate Canadian citizens. This chapter will focus on how the teaching of psychological literacy can have an impact on Canadian

society by examining the role of psychologically literate citizens in addressing pressing social issues in this country. The authors explore how psychological literacy may improve decision making and ethical behavior with regard to a number of key Canadian issues: volunteerism, environmental sustainability, illicit drug use, healthcare, and multiculturalism and diversity. In addition to demonstrating how psychological literacy may be taught through class exercises specific to these social issues, they also offer a recent Canadian psychology degree as a model of how this goal might be met on a broader scale. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Citizenship](#)
[*Decision Making](#)
[*Literacy](#)
[*Psychology Education](#)
[*Social Issues](#)
[Diversity](#)
[Drug Abuse](#)
[Educational Degrees](#)
[Ethics](#)
[Health Care Delivery](#)
[Volunteers](#)
[Multiculturalism](#)
[Sustainable Development](#)

Source: PsycINFO

84. From disordered eating to addiction: The "food drug" in bulimia nervosa.

Citation: Journal of Clinical Psychopharmacology, June 2012, vol./is. 32/3(376-389), 0271-0749;1533-712X (Jun 2012)

Author(s): Umberg, Erin N; Shader, Richard I; Hsu, L. K. George; Greenblatt, David J

Correspondence Address: Greenblatt, David J.: Tufts University, School of Medicine, 136 Harnson Ave., Boston, MA, US, 02111, dj.greenblatt@tufts.edu

Institution: Umberg, Erin N.: Department of Molecular Physiology, Tufts University, School of Medicine, Medford, MA; Shader, Richard I.: Department of Molecular Physiology, Tufts University, School of Medicine, Medford, MA; Hsu, L. K. George: Department of Psychiatry, Tufts Medical Center, Boston, MA; Greenblatt, David J.: Department of Molecular Physiology, Tufts University, School of Medicine, Medford, MA

Language: English

Abstract: The high prevalence of substance abuse in individuals with bulimia nervosa (BN) and the pervasive symptom substitution in many types of drug addiction suggest that a number of substances-including food-can impair an individual's self-control, even in the presence of negative consequences. Nonetheless, the neurobiological similarities between BN and drug addiction are not clearly established. This review explores how the specific eating patterns seen in BN (binge eating and purging, with intermittent dietary restriction) are particularly addictive and differentiate BN from other eating disorders and obesity. A number of peripheral and central biological aberrations seen in BN may result in altered reward sensitivity in these individuals, particularly through effects on the dopaminergic system. Neurobiological findings support the notion that BN is an addictive disorder, which has treatment implications for therapy and pharmacological manipulations. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Lippincott Williams & Wilkins; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Bulimia](#)
[*Drug Therapy](#)
[*Obesity](#)
[*Binge Eating Disorder](#)
[Drug Addiction](#)

[Food](#)
[Neurobiology](#)
[Self Control](#)

Source: PsycINFO
Full Text: Available in *fulltext* at *Ovid*

85. Substance abuse and relapse prevention.

Citation: Wisdom and compassion in psychotherapy: Deepening mindfulness in clinical practice., 2012(221-233) (2012)

Author(s): Marlatt, G. Alan; Bowen, Sarah; Lustyk, M. Kathleen B

Institution: Marlatt, G. Alan: Addictive Behaviors Research Center, University of Washington, Seattle, WA; Bowen, Sarah: Addictive Behaviors Research Center, University of Washington, Seattle, WA; Lustyk, M. Kathleen B.: Seattle Pacific University, Seattle, WA

Language: English

Abstract: (from the chapter) As many of the contributors to this book have pointed out, mindfulness provides an entry into making more skillful choices. In that mindful moment of a choice point, there is the potential to decide differently, even if we don't do this every time. Step by step, we can slowly create for ourselves a path that leads to less destructive behavior, accruing along the way a better sense of self-efficacy, positive growth, and confidence. The authors begin with a case that illustrates how mindfulness meditation can enhance treatment outcomes by offering a metacognitive coping strategy for relapse prevention. They then describe a variety of strategies used in Mindfulness Based Relapse Prevention that are consistent with the principles of compassion and wisdom. Interwoven in this section are neurobiological findings that help to illuminate mechanisms by which mindfulness meditation may be helpful in reducing the risk of relapse among individuals who have struggles with addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)
[*Drug Abuse](#)
[*Meditation](#)
[*Relapse Prevention](#)
[*Mindfulness](#)
[Decision Making](#)
[Neurobiology](#)
[Sympathy](#)
[Wisdom](#)

Source: PsycINFO

86. Lived consumer bodies: Narcissism, bodily discourse, and women's pursuit of the body beautiful.

Citation: Gender, culture, and consumer behavior., 2012(195-221) (2012)

Author(s): Woodruffe-Burton, Helen; Ireland, Katie

Institution: Woodruffe-Burton, Helen: Newcastle Business School, University of Northumbria, Newcastle upon Tyne

Language: English

Abstract: (from the chapter) The body has received academic attention over the years and Vaknin, among others, has demonstrated how our daily lives are becoming a mirage of images that result in a total preoccupation with image management and self-enhancement. Marketing plays a role in consumers' perceptions of body image and underpins aspects of the cultural ideology of the body that underlies consumers' sense of an ideal or more desirable body. This bodily discourse is manifested through advertising, media images, and product symbolism, for example, as well as through social interaction. At the same time, conditions of postmodernity, while purporting to offer the postmodern consumer freedom

to choose from a wide range of cultural narratives and identities, may be seen as an optimistic theoretical construction far removed from freedom in the self-understanding expressed by consumers. Indeed, conditions of postmodernity can give rise to uncertainty about the self and may even undermine self-concept. The existing literature on the political, symbolic, and public aspects of the body is reviewed here because these aspects are particularly pronounced in the context of body image and cultural ideology of the body. The literature on narcissism offers a useful theoretical framework for understanding individuals' struggle for identity and the suffering associated with the postmodern condition in the twenty-first century. Moreover, taking the view that consumption itself is embodied and that consumers' performative enactment of identity "must occur through the body", this chapter argues that bodily manifestations of self are inevitably gendered both politically and culturally. Theoretical advancement within this area of consumer research therefore rests on our understanding of gender in consumers' lived experience of consumption. Underpinned by the theoretical and conceptual explorations described before, a study of women who are self-professed "gym addicts" has been undertaken to explore contemporary women's lived experience of body maintenance and body image. The findings are examined through the lens of gender, academic perspectives on the body, and narcissism. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Body Image](#)
[*Human Body](#)
[*Narcissism](#)
[*Self Concept](#)
[*Ideology](#)
[Consumer Behavior](#)
[Human Females](#)
[Marketing](#)
[Postmodernism](#)
[Sex Role Attitudes](#)
[Theories](#)

Source: PsycINFO

87. Moderating effect of personality type on the relation between sensation seeking and illegal substance use in adolescents.

Citation: International Journal of Developmental Science, 2011, vol./is. 5/1-2(113-126), 2192-001X;2191-7485 (2011)

Author(s): Roth, Marcus; Liebe, Nico

Correspondence Address: Roth, Marcus: University of Duisburg-Essen, Berliner Platz 6-8, Essen, Germany, 45127, Marcus.Roth@uni-due.de

Institution: Roth, Marcus: Department of Psychology, University of Duisburg-Essen, Essen; Liebe, Nico: Department of Psychology, University of Duisburg-Essen, Essen

Language: English

Abstract: This study examined the moderating effect of big-five based personality types on the relation between sensation seeking and three adolescent marijuana use outcomes (lifetime use, current use, attraction to marijuana use). 1,236 German adolescents, aged 14 to 16 years, participated in the current study. The results show that sensation seeking is indeed related to marijuana consumption in adolescents, but that this relation is moderated by personality type. For instance, in adolescents with a resilient personality structure (low scores in neuroticism, medium to high scores in extraversion, openness, agreeableness, and conscientiousness) the "classical" relation between sensation seeking and marijuana use is not valid. Future implications are discussed in light of these results. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved; HOLDER: IOS Press and the authors.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Attitudes](#)

*Drug Abuse
 *Marijuana Usage
 *Sensation Seeking
 Personality

Source: PsycINFO

88. Oral presentations.

Citation: Acta Neuropsychiatrica, April 2012, vol./is. 24/Suppl 1(5-20), 0924-2708;1601-5215 (Apr 2012)

Author(s): No authorship indicated

Language: English

Abstract: Presents a collection of abstracts of oral presentations from SCNP 2012, including lectures and symposium presentations. Symposia included abuse/addiction and comorbidity with psychiatric disorders, drug development in complex disorders, opportunities for drug development in psychiatry, SCNP 2012 frontiers, effects of antipsychotics on the brain, how antidepressants work, SCNP young scientists, and newer treatments in bipolar disorder. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: John Wiley & Sons A/S; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Professional Organizations
 *Scientific Communication
 *Neuropsychopharmacology
 Drug Therapy

Source: PsycINFO

Full Text: Available in *fulltext* at [Wiley](#)

89. "Check dein Spiel" (Check Your Gambling) internet-based prevention of problem gambling.

Original Title: Check dein Spiel: Internetbasierte Prævention von problematischem Glücksspiel.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2012, vol./is. 58/1(63-68), 0939-5911 (Feb 2012)

Author(s): Jonas, Benjamin; Tossmann, Peter; Leuschner, Fabian; Pauly, Anne; Bender-Roth, Heike; Brand, Thomas; Lang, Peter

Correspondence Address: Jonas, Benjamin: DELPHI-Gesellschaft für Forschung, Beratung und Projektentwicklung mbH, Kaiserdamm 8, Berlin, Germany, DE-14057, jonas@delphi-gesellschaft.de

Institution: Jonas, Benjamin: DELPHI-Gesellschaft für Forschung, Beratung und Projektentwicklung mbH, Berlin; Tossmann, Peter: DELPHI-Gesellschaft für Forschung, Beratung und Projektentwicklung mbH, Berlin; Leuschner, Fabian: DELPHI-Gesellschaft für Forschung, Beratung und Projektentwicklung mbH, Berlin; Pauly, Anne: Bundeszentrale für Gesundheitliche Aufklärung (BZgA), Köln; Bender-Roth, Heike: Bundeszentrale für Gesundheitliche Aufklärung (BZgA), Köln; Brand, Thomas: Bundeszentrale für Gesundheitliche Aufklärung (BZgA), Köln; Lang, Peter: Bundeszentrale für Gesundheitliche Aufklärung (BZgA), Köln

Language: German

Abstract: Background: Due to the increasing usage of online-gambling in everyday life, the relevance of internet-based addiction prevention becomes more and more evident. Interactive offers are of special interest, as they allow for the adaptation of the website content to the user's situation and needs. In order to prevent the risks of problematic gambling the German Federal Centre for Health Education (BZgA) has developed an according offer called "Check dein Spiel" (CDS, check your gambling). Aim: This article gives an overview of the interactive contents of this website and explains how they are used in the prevention of problem gambling and pathological gambling. At first, the

self-test is described, which allows gamblers to get an individual feedback on their gambling behavior. Second, the structured counseling program of CDS is reported and experiences are discussed that were made since its online start. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Internet](#)
[*Pathological Gambling](#)
[*Prevention](#)
[*Risk Factors](#)
Source: PsycINFO

90. Characteristics of inpatient Bundeswehr alcoholics compared to civil patients.

Original Title: Charakteristika der Alkoholerkrankung bei Bundeswehrsoldaten in der stationären Versorgung im Vergleich zu zivilen Patienten.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2012, vol./is. 58/1(55-61), 0939-5911 (Feb 2012)

Author(s): Zimmermann, Peter; Kowalski, Jens; Heinrich, Michaela; Willmund, Gerd; Heinz, Andreas

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Institution: Zimmermann, Peter: Zentrum für Psychiatrie und Psychotraumatologie, Bundeswehrkrankenhaus Berlin, Berlin; Kowalski, Jens: Zentrum für Psychiatrie und Psychotraumatologie, Bundeswehrkrankenhaus Berlin, Berlin; Heinrich, Michaela: Zentrum für Psychiatrie und Psychotraumatologie, Bundeswehrkrankenhaus Berlin, Berlin; Willmund, Gerd: Zentrum für Psychiatrie und Psychotraumatologie, Bundeswehrkrankenhaus Berlin, Berlin; Heinz, Andreas: Klinik für Psychiatrie und Psychotherapie, Berlin

Language: German

Abstract: Aims: Inpatient treatment of addictive disorders should be adapted to the needs of target groups. This study investigates specific characteristics of acute inpatient Bundeswehr alcohol use disorder patients. Methods: 158 patients (115 soldiers, 43 civil) were inpatients in the Bundeswehr hospital Berlin for alcohol disorders (ICD-10: F10.1/F10.2). They were evaluated retrospectively for duration of abuse, diagnosis and average consumption and compared with an inpatient military control group with respect to psychosocial, military and medical characteristics. Results: Civil patients had (as an age-related effect) a significantly longer duration of alcohol abuse, higher average consumption and more often the diagnosis of an alcohol dependence than their military counterparts. Family conflicts correlated significantly with higher, and problems with military comrades or superiors with lower alcohol intake. Conclusions: The results suggest differences in the history of alcohol consumption between military and civil patients in an acute inpatient treatment setting and thus reflect the early onset of alcohol-related interventions in the German Armed Forces due to military regulations. An adaptation of therapeutic programs for soldiers might be useful. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Alcohol Rehabilitation](#)
[*Alcoholism](#)
[*Client Characteristics](#)
[*Hospitalization](#)
[*Military Personnel](#)

Source: PsycINFO

91. Patterns of attachment in cannabis vs. ecstasy-abusers.

Original Title: Bindungsmuster von Cannabis- und Ecstasykonsumenten.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2012, vol./is. 58/1(45-53), 0939-5911 (Feb 2012)

Author(s): Schindler, Andreas; Sack, Peter-Michael; Thomasius, Rainer

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Institution: Schindler, Andreas: Spezialambulanz für Persönlichkeits- und Belastungsstörungen, Universitätsklinikum Hamburg, Eppendorf; Sack, Peter-Michael: Deutsches Zentrum für Suchtfragen des Kindes- und Jugendalters (DZSKJ), Universitätsklinikum Hamburg, Eppendorf; Thomasius, Rainer: Deutsches Zentrum für Suchtfragen des Kindes- und Jugendalters (DZSKJ), Universitätsklinikum Hamburg, Eppendorf

Language: German

Abstract: Aims: Earlier studies have found a link between fearful-avoidant attachment and opioid abuse. This study is analyzing whether this link is a general one across different groups of substance abusers. Method: Patterns of attachment (Bartholomew Attachment Interview) were examined in two groups of cannabis (N = 19) and ecstasy (N = 31) abusing young adults. Participants had to be relatively "pure" consumers of the respective substance. Results: Cannabis-abusers were mainly dismissing or secure. Ecstasy-abusers were equally distributed to all three insecure patterns, there were hardly any secure Individuals. Conclusions: Patterns of attachment seem to differ considerably across abusers of different substances. The cannabis group contained a secure and an insecure, mainly dismissing subgroup. Results of the ecstasy group do not support the hypothesis of a link between the abuse of stimulants and a preoccupied, hyperactivating pattern of attachment. However, insecurity of ecstasy-abusers indicates a more severely affected group. Results have to be replicated in a larger study. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Attachment Behavior](#)
[*Cannabis](#)
[*Drug Abuse](#)
[*Methylenedioxymethamphetamine](#)

Source: PsycINFO

92. Genetics of alcohol dependence in humans: Recent findings and perspectives.

Citation: Sucht: Zeitschrift für Wissenschaft und Praxis, February 2012, vol./is. 58/1(9-21), 0939-5911 (Feb 2012)

Author(s): Preuss, Ulrich W; Walther, Christine; Wong, Jessica W. M

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Language: English

Abstract: Aim: Several lines of evidence from various scientific approaches indicate that alcohol dependence (AD) in humans is genetically influenced. The aim of this review is to report

recent findings, new approaches and developments in revealing the genetic underpinnings of alcohol dependence in humans. Results: Results mainly from marker-dependent studies (linkage, case-control association and genome-wide association) and intermediate phenotypes (endophenotypes) are reported as well as findings from recent pharmacogenomic and epigenetic research on alcohol use disorders. Based on the findings, potential perspectives for future research are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Genetics](#)

Source: PsycINFO

93. Is there a 'low-risk' drinking level for youth? The risk of acute harm as a function of quantity and frequency of drinking.

Citation: Drug and Alcohol Review, March 2012, vol./is. 31/2(184-193), 0959-5236;1465-3362 (Mar 2012)

Author(s): Thompson, Kara D; Stockwell, Tim; Macdonald, Stuart

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Institution: Thompson, Kara D.: Centre for Addictions Research of BC, University of Victoria, Victoria, BC; Stockwell, Tim: Centre for Addictions Research of BC, University of Victoria, Victoria, BC; Macdonald, Stuart: Centre for Addictions Research of BC, University of Victoria, Victoria, BC

Language: English

Abstract: Introduction and Aims: Drinking guidelines have rarely provided recommendations for different age groups despite evidence of significant age effects on alcohol consumption and related risks. This study attempted to quantify the degree of risk associated with lower levels of consumption for people under 25 years of age, with the broader purpose of informing the development of Canadian low-risk drinking guidelines. Design and Methods: A random community-based sample of 540 youth aged 16-23 (54.4% female) completed an interview concerning alcohol consumption patterns and a broad range of acute health and social harms. Logistic regression analyses were designed to test whether there were discernible thresholds of risk as a function of both gender and age. Results: A significant proportion of young people consumed in excess of adult drinking limits recommended by the Centre for Addiction and Mental Health (CAMH) to minimise risk of alcohol-related harm. Compared with abstainers, rates of reported harm increased linearly with increasing frequency and quantity levels. However, problems were most strongly associated with consumption in excess of two drinks per occasion and a frequency of more than once a week. No independent effects of age or gender were identified. Discussion and Conclusions: The CAMH guidelines for adult drinkers do not adequately address acute risks for young people. More specific guideline recommendations for young people could be considered with a more prominent focus on drinking quantity (one to two drinks per occasion), and a recommended frequency of consumption (once a week). (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Alcohol Drinking Patterns](#)
[*Developmental Age Groups](#)
[*Health](#)
[*Risk Assessment](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [Wiley](#)

94. Fruit and vegetable intake among rural youth following a school-based randomized controlled trial.

Citation: Preventive Medicine: An International Journal Devoted to Practice and Theory, February 2012, vol./is. 54/2(150-156), 0091-7435 (Feb 1, 2012)

Author(s): Wilson, Diane Baer; Jones, Resa M; McClish, Donna; Westerberg, Alice L; Danish, Steven

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Language: English

Abstract: Objective: We implemented a theory-based randomized controlled trial (Living Free of Tobacco, Plus (LIFT+)) in ten rural middle schools and assessed impact on tobacco use and fruit/vegetable (F/V) intake in 2008-2010. Data on F/V intake at baseline, immediate post intervention, and 1-year follow-up are presented. Methods: Schools were randomized to interve groups. Goal setting, peer leaders, and class workshops with parent involvement, were intervention features; community partners were supportive. Seventh graders filled out surveys on health behaviors, psycho-social variables, and demographic characteristics. Adjusted models comparing intervention and control conditions were analyzed. Results: Sample (n = 1119) was 48.5% female, 50% White, with a mean age of 12.7 years. Mean F/V servings were significantly higher in intervention schools at immediate post (3.19 servings) and at 1-year (3.02 servings) compared to controls (2.90, 2.69 respectively). Knowledge of 5-a-day recommendation was significantly higher in intervention schools at immediate post test (75.0%) versus controls (53.8%) but not at 1-year follow-up. Conclusions: Intervention schools reported significantly higher mean F/V servings at post intervention and 1-year, and for knowledge of F/V recommendations at immediate post compared to controls. Higher levels of parent and community involvement may further increase F/V intake in future interventions. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Food Intake](#)
[*Nicotine](#)
[*Rural Environments](#)
[*School Based Intervention](#)
[Middle School Students](#)

Source: PsycINFO

95. Transformative impact and initiatives of the mental health consumer/survivor movement.

Citation: Service delivery for vulnerable populations: New directions in behavioral health., 2011(415-430) (2011)

Author(s): Rosenthal, Harvey

Institution: Rosenthal, Harvey: New York Association of Psychiatric Rehabilitation Services, NY

Language: English

Abstract: (from the chapter) Inspired by the civil rights and psychiatric reform movements, as well as the 12-step addiction recovery and cross-disability community integration movements, the "mental health consumer/survivor/ex-patient movement" emerged in the 1960s. Its original mission was to take action against the dehumanizing personal and social impact of a psychiatric diagnosis and the damaging effects of psychiatric treatments and medications that had been the experience of thousands of individuals in the United States and internationally. Since then, its focus has moved well beyond fighting against the loss of hope, meaning, connection, and wellness that resulted from contact with traditional mental health services, to innovative initiatives and values that are fundamentally transforming those systems. And as new health and behavioral health systems seek approaches that demonstrate measurable outcomes through cost-effective alternatives to costly emergency, inpatient and lifelong stays in community programs, recovery-centered "peer-run" services are playing important and innovative roles. This chapter will highlight some of the movement's key contributions and initiatives as it also recognizes the landmark efforts of some extraordinary pioneers. It includes web links describing the lives and contributions of leaders within this movement (see the References section to access these links). This chapter is meant to serve as an introduction to some of our field's most provocative challenges. It offers a resource of promising new innovations for further study and incorporation into modern practice. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Civil Rights](#)
[*Health Care Delivery](#)
[*Mental Health](#)
[*Survivors](#)
[*Health Care Reform](#)

Source: PsycINFO

96. Behavioral health issues for older adults: Substance abuse and psychiatric disability.

Citation: Service delivery for vulnerable populations: New directions in behavioral health., 2011(231-245) (2011)

Author(s): Guida, Frank; Estrine, Steven A

Language: English

Abstract: (from the chapter) This chapter will discuss drug and alcohol abuse among older persons, including drug interactions between alcohol and medications, comorbidities, and prevalence among women. It will discuss the fiscal impact on the economy of older persons with substance abuse and comorbid conditions. The chapter will also address working with older minority populations. Finally, the chapter will offer several innovative evidence-based treatment interventions. It will conclude with ways to overcome barriers to treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Evidence Based Practice](#)
[*Health Care Delivery](#)
[*Mental Disorders](#)
[Comorbidity](#)
[Drug Rehabilitation](#)
[Economy](#)
[Human Sex Differences](#)
[Minority Groups](#)
[Treatment Barriers](#)

Source: PsycINFO

97. Children, youth, and families: Needs and issues.

Citation: Service delivery for vulnerable populations: New directions in behavioral health., 2011(71-85) (2011)

Author(s): Arthur, Heidi; Bowler, Susan; Fisher, Nina Rose

Institution: Arthur, Heidi: SAE & Associates, New York, NY

Language: English

Abstract: (from the chapter) Federal and state agencies, advocates, and private service providers agree that children and youth arrive at the doors of existing mental health, substance abuse, juvenile justice, and child welfare service systems with co-occurring needs, which require highly coordinated services from multiple agencies. They must overcome pervasive stigma to seek treatment, only to encounter a fragmented maze of providers with bewildering and sometimes contradictory eligibility, funding, and service requirements. The door at which children and youth arrive is often dictated by what happens to be available, rather than which services would meet their specific needs. At the community level, services are too often unevenly distributed, substantial gaps are common, and measures of service quality are evolving. The system is heavily weighted toward care for those with a high level of acuity. For example, children are unlikely to receive service as soon as they begin skipping school, but may find themselves in a detention center a couple of years later for shoplifting. Often, services are organized around the needs and values of providers—from hours and locations to the cultural values and assumptions sensitivity of professionals. Children and their families need treatment options and providers that are aligned with real needs rather than bureaucratic necessity. Culture is the lens through which each individual understands the world—including health, illness, and recovery. Yet, the service system is disproportionately drawn from the ranks of white, middle-class people serving diverse ethnic, racial, and linguistic communities. As well, the service system is not organized to deal with the full range of challenges children, youth, and families face in the process of recovery. While family needs may include housing, food, and employment, as well as parental behavioral health and medical care there is very limited infrastructure in the service system for joint and integrated planning. This chapter explores these issues as they affect children and youth with mental health and substance abuse challenges needs within the juvenile justice and child welfare systems. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Child Welfare](#)
[*Drug Abuse](#)
[*Juvenile Justice](#)
[*Mental Disorders](#)
[*Mental Health Services](#)
[Family](#)
[Health Care Delivery](#)
[Health Service Needs](#)

Source: PsycINFO