

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. Differential rearing environments affect response to novelty, amphetamine self-administration and neurochemical effect of amphetamine in lewis and fischer inbred rat strains: A gene-environment interaction.

- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)
- Author(s):** Meyer, Andrew Charles Jr.
- Institution:** U Kentucky, US
- Language:** English
- Abstract:** Previous research has demonstrated both genetic and environmental influences on substance abuse vulnerability. More recently, investigators have turned to examining the interaction of genes and environment, and how they may influence individual differences in vulnerability to substance abuse. The current work sought to investigate the interaction of genes and environment on novelty seeking, amphetamine self-administration, and neurochemical response to amphetamine. Inbred Lewis (LEW) and Fischer (F344) rat strains raised in either an enriched condition (EC), social condition (SC), or isolated condition (IC) were used. These inbred strains were chosen because LEW are more responsive to novelty and self-administer more amphetamine than F344. In addition, this environmental manipulation was used because outbred IC rats also are more responsive to novelty and self-administer more amphetamine than outbred EC rats. It was shown that response to inescapable novelty was decreased by environmental enrichment compared to isolation, regardless of the inbred strain used. However no environmental or strain differences were obtained in free choice novelty. When compared to IC rats, EC rats showed reduced acquisition of amphetamine self-administration in both LEW and F344 strains. In contrast, when compared to IC rats, SC rats showed reduced acquisition of amphetamine self-administration in F344 only, demonstrating that the difference between LEW and F344 in addiction liability may only be observed under social housing conditions. Lastly, while no differences were identified in DA, differences were obtained in levels of DOPAC following acute administration of amphetamine, with IC LEW having an attenuated decrease compared to IC F344 and EC LEW. While previous work has shown that LEW are "addiction prone" relative to F344, the current results indicate that this strain difference is moderated by environmental conditions. **KEYWORDS:** Gene-Environment Interactions, Response to Novelty, Self-Administration, Microdialysis, Amphetamine (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Publication Type:** Dissertation Abstract
- Subject Headings:** [*Genetics](#)
[Amphetamine](#)
[Genes](#)
[Rats](#)
- Source:** PsycINFO

2. Assessment of wellness and nutrition in residential alcohol and drug abuse treatment.

- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)
- Author(s):** Reid, Barbara Koffske
- Institution:** Brandeis U, The Heller School for Social Policy and Management, US
- Language:** English
- Abstract:** Drug and alcohol addiction is a chronic relapsing brain disease that often co-occurs with physical and mental health problems. The nutrition of people with substance use problems is often compromised. Research shows aspects of wellness and nutrition to be protective for physical and mental health; yet, it is not known if programs are integrating this information into treatment. This study inquired as to what residential substance abuse treatment programs were doing to integrate wellness and specifically nutrition into treatment and how these initiatives are adopted. The study examined the type and

frequency of wellness activities and specific foods in relation to promoting health, guided by Rogers' theory on the adoption of innovations. A survey was developed and sent to 67 licensed adult residential treatment programs in Massachusetts; 52 directors agreed to participate (78% response rate). In-depth interviews were done with 10 directors. Logistic regression was used to examine relationships between theory-driven independent variables and wellness activities and nutrition that promotes health. Overall, 44% of programs offer wellness activities frequently enough to promote health, 53% offer plant-based foods frequently enough to promote health and less than 10% offer processed foods infrequently enough to be considered promoting health. Over 67% of programs report offering fruit more than once a day, yet less than 30% report the same for dark green leafy vegetables. Over 84% of programs offer access to medical appointments or disease management very regularly or always. Less than half the programs offered exercise as frequently. Program directors with a Master's degree or higher was predictive of higher wellness activities. Women's programs and TC's were more likely than men-only and other types of programs to offer plant-based foods frequently enough to promote health. Directors with additional wellness/nutrition training were associated with offering lower frequencies of processed foods. Nutrition and wellness initiatives can increase protective factors that may positively affect the process of recovery. In light of the existing research and the relevance to mental health, policies are needed that require integrating wellness activities and increasing the quality of nutrition within programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Mental Health](#)
[Alcoholism](#)
[Nutrition](#)
[Residential Care Institutions](#)

Source: PsycINFO

3. Exploring substance use disorders community outpatient counselors' experiences treating clients with co-occurring medical conditions: An interpretative phenomenological analysis.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

Author(s): Cathers, Laretta Anne

Institution: Virginia Commonwealth U., US

Language: English

Abstract: The Interpretative Phenomenological Analysis study presents the findings from a qualitative study examining substance use disorders (SUD) community outpatient treatment counselors' experiences treating clients with co-occurring medical conditions. Interviews from five SUD community outpatient treatment counselors resulted in four emerging super-ordinate themes. The findings illustrate the relationships between SUDs, medical conditions and other predisposing, enabling and need factors. In order to assist clients in focusing on therapy, counselors work to identify resources to treat the basic needs of the clients, including medical care. Challenges included limited resources, complex system processes, and client fear and apathy. In addition, various unique challenges related to medical conditions treated by potentially habit forming medications and traumatic brain injury were identified. Counselors discussed how their roles and responsibilities have expanded to include case management and additional responsibility for the overall well-being of the clients they serve. They encouraged SUD educators to include more education on counselor self-care, trauma, pain conditions and the assessment process. Implications from the study highlight the need for integrated behavioral and physical health care. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Counselors](#)
[*Outpatients](#)
[Clients](#)

[Drug Abuse](#)
[Drug Therapy](#)
[Outpatient Treatment](#)
[Phenomenology](#)

Source: PsycINFO

4. The effect of concurrent alcohol, drug, psychiatric and vocational treatment on consumer issues, treatment participation, and employment.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

Author(s): Kim, Min

Institution: East Carolina U., US

Language: English

Abstract: Despite high rates of unemployment among individuals with substance use disorders (SUDs) with psychiatric issues, little is known about a substance abuse intensive outpatient program (SAIOP) based on vocational counseling services. Further, limited research exists on relationships between five critical variables (baseline alcohol use, drug use, and psychiatric issue severity; treatment participation rate; and employment status at 210 days). The purpose of this study was two-fold: (1) to assess the effectiveness of SAIOP based on vocational counseling services for unemployed or underemployed individuals with SUDs by comparing baseline and 210-day post-baseline rates of employment and levels of alcohol use, drug use, and psychiatric issue severity as measured by the addiction severity index 5 (ASI-5); and (2) to determine the direct and indirect effects between five critical variables, and specifically whether treatment participation rate mediates the relationship between baseline levels of consumers' issues and employment at 210 days. For the first research question, t-test and two-by three tables were conducted. For the second research question, structural equation modeling was used to examine two theoretical models (initial and revised models). This study used archival data from Project Working Recovery (PWR) with 106 participants who completed both the baseline and 210-day post-baseline PWR evaluation survey. Based on the outcomes of consumers attending an SAIOP based on vocational counseling services tended to have less severe alcohol, drug, psychiatric issues, and improved percentages of employment at 210 days. Additionally, this study found that treatment participation rate mediated the relationship between alcohol use, drug use, and psychiatric issue severity and 210-day employment status. Findings highlight the effectiveness of SAIOP based on vocational counseling services in order to reduce consumers' alcohol, drug, and psychiatric issue severities and improve percentages of employment. Moreover, the mediating effect of treatment participation rate is powerful in order to improve treatment outcomes although consumers have severe issues, which influence their treatment participation rates negatively. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: [*Alcohols](#)
[*Outpatient Treatment](#)
[*Treatment Outcomes](#)
[Drug Abuse](#)
[Occupational Guidance](#)
[Outpatients](#)
[Treatment Compliance](#)
[Treatment Effectiveness Evaluation](#)
[Unemployment](#)

Source: PsycINFO

5. Contribution of variants in chrna5/a3/b4 gene cluster on chromosome 15 to tobacco smoking: From genetic association to mechanism.

- Citation:** Molecular Neurobiology, December 2014(No Pagination Specified), 0893-7648;1559-1182 (Dec 5, 2014)
- Author(s):** Wen, Li; Jiang, Keran; Yuan, Wenji; Cui, Wenyan; Li, Ming D
- Correspondence Address:** Cui, Wenyan: State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China, cuiwy@zju.edu.cn
- Institution:** State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China; State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China; State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China; State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China; State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China; State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China; State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, Zhejiang University School of Medicine, Hangzhou, China
- Abstract:** Cigarette smoking is the major cause of preventable death and morbidity throughout the world. Many compounds are present in tobacco, but nicotine is the primary addictive one. Nicotine exerts its physiological and pharmacological roles in the brain through neuronal nicotinic acetylcholine receptors (nAChRs), which are ligand-gated ion channels consisting of five membrane-spanning subunits that can modulate the release of neurotransmitters, such as dopamine, glutamate, and GABA and mediate fast signal transmission at synapses. Considering that there are 12 nAChR subunits, it is highly likely that subunits other than 4 and 2, which have been intensively investigated, also are involved in nicotine addiction. Consistent with this hypothesis, a number of genome-wide association studies (GWAS) and subsequent candidate gene-based associated studies investigating the genetic variants associated with nicotine dependence (ND) and smoking-related phenotypes have shed light on the CHRNA5/A3/B4 gene cluster on chromosome 15, which encodes the 5, 3, and 4 nAChR subunits, respectively. These studies demonstrate two groups of risk variants in this region. The first one is marked by single nucleotide polymorphism (SNP) rs16969968 in exon 5 of CHRNA5, which changes an aspartic acid residue into asparagine at position 398 (D398N) of the 5 subunit protein sequence, and it is tightly linked SNP rs1051730 in CHRNA3. The second one is SNP rs578776 in the 3'-untranslated region (UTR) of CHRNA3, which has a low correlation with rs16969968. Although the detailed molecular mechanisms underlying these associations remain to be further elucidated, recent findings have shown that 5* (where "*" indicates the presence of additional subunits) nAChRs located in the medial habenulo-interpeduncular nucleus (mHb-IPN) are involved in the control of nicotine self-administration in rodents. Disruption of 5* nAChR signaling diminishes the aversive effects of nicotine on the mHb-IPN pathway and thereby permits more nicotine consumption. To gain a better understanding of the function of the highly significant genetic variants identified in this region in controlling smoking-related behaviors, in this communication, we provide an up-to-date review of the progress of studies focusing on the CHRNA5/A3/B4 gene cluster and its role in ND. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Springer Science+Business Media New York; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO

6. Gc-ms-based plasma metabolomic investigations of morphine dependent rats at different states of euphoria, tolerance and naloxone-precipitated withdrawal.

- Citation:** Metabolic Brain Disease, December 2014(No Pagination Specified), 0885-7490;1573-7365 (Dec 4, 2014)
- Author(s):** Liu, Ruoxu; Cheng, Jianhua; Yang, Jingwen; Ding, Xinghua; Yang, Shuguang; Dong, Fangting; Guo, Ning; Liu, Shaojun
- Correspondence Address:** Dong, Fangting: National Center of Biomedical Analysis, 27 Taiping Road, Beijing, China, 100850, dft@proteomics.cn
- Institution:** State Key Laboratory of Proteomics and Department of Neurobiology, Institute of Basic Medical Sciences, Beijing, China; National Center of Biomedical Analysis, Beijing, China; State Key Laboratory of Proteomics and Department of Neurobiology, Institute of Basic Medical Sciences, Beijing, China; State Key Laboratory of Proteomics and Department of Neurobiology, Institute of Basic Medical Sciences, Beijing, China; State Key Laboratory of Proteomics and Department of Neurobiology, Institute of Basic Medical Sciences, Beijing, China; National Center of Biomedical Analysis, Beijing, China; Department of Cell Immunology, Institute of Basic Medical Sciences, Beijing, China; State Key Laboratory of Proteomics and Department of Neurobiology, Institute of Basic Medical Sciences, Beijing, China
- Abstract:** Long-term or excessive application of morphine leads to tolerance and addiction, which hindered its conventional applications as a drug. Although tremendous progress has been made on the mechanisms of morphine, crucial evidence elaborating the neurobiological basis of tolerance and dependence is still lacking. To further explore the physiological adaptations during morphine's application, a systematic screening of small molecules in blood has been carried out. The plasma of morphine dependent rats was collected at different time points with or without naloxone treatment, and was analyzed by gas chromatography-mass spectrometry (GC-MS). Partial least squares discriminate analysis (PLS-DA) and the Student's t Tests with the false discovery rate (FDR) correction were conducted on the normalized data for the distinction of groups and the identification of the most contributed metabolites. Clear separation is observed between different treatments, and 29 out of 41 metabolites changes significantly compared with the corresponding controls. The concentration of threonine, glycine, serine, beta-d-glucose and oxalic acid are consistently changed in all morphine treated groups compared with controls. Through this experiment we find characteristic metabolites in different dependent states and discuss the possible compensation effects. The interpretation of these metabolites would throw light on the biological effects of morphine and reveal the possibilities to become marker of morphine addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Springer Science+Business Media New York; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO

7. Reduced volume of the nucleus accumbens in heroin addiction.

- Citation:** European Archives of Psychiatry and Clinical Neuroscience, December 2014(No Pagination Specified), 0940-1334;1433-8491 (Dec 3, 2014)
- Author(s):** Seifert, Christian L; Magon, Stefano; Sprenger, Till; Lang, Undine E; Huber, Christian G; Denier, Niklaus; Vogel, Marc; Schmidt, Andre; Radue, Ernst-Wilhelm; Borgwardt, Stefan; Walter, Marc
- Correspondence Address:** Seifert, Christian L.: Department of Neurology, Technische Universitat Munchen, Ismaninger Str. 22, Munich, Germany, 81675, c.seifert@lrz.tu-muenchen.de
- Institution:** Department of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland; Department of Neurology, University Hospital of Basel, Basel, Switzerland; Department of Neurology, University Hospital of Basel, Basel, Switzerland; Department

of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland; Department of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland; Department of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland; Department of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland; Department of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland; Medical Image Analysis Centre, University Hospital of Basel, Basel, Switzerland; Department of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland; Department of Psychiatry, University Psychiatric Clinics (UPK) of Basel, Basel, Switzerland

Abstract:

The neural mechanisms of heroin addiction are still incompletely understood, even though modern neuroimaging techniques offer insights into disease-related changes in vivo. While changes on cortical structure have been reported in heroin addiction, evidence from subcortical areas remains underrepresented. Functional imaging studies revealed that the brain reward system and particularly the nucleus accumbens (NAcc) play a pivotal role in the pathophysiology of drug addiction. The aim of this study was to investigate whether there was a volume difference of the NAcc in heroin addiction in comparison to healthy controls. A further aim was to correlate subcortical volumes with clinical measurements on negative affects in addiction. Thirty heroin-dependent patients under maintenance treatment with diacetylmorphine and twenty healthy controls underwent structural MRI scanning at 3T. Subcortical segmentation analysis was performed using FMRIB's Integrated Registration and Segmentation Tool function of FSL. The State-Trait Anxiety Inventory and the Beck Depression Inventory were used to assess trait anxiety and depressive symptoms, respectively. A decreased volume of the left NAcc was observed in heroin-dependent patients compared to healthy controls. Depression score was negatively correlated with left NAcc volume in patients, whereas a positive correlation was found between the daily opioid dose and the volume of the right amygdala. This study indicates that there might be structural differences of the NAcc in heroin-dependent patients in comparison with healthy controls. Furthermore, correlations of subcortical structures with negative emotions and opioid doses might be of future relevance for the investigation of heroin addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication:

HOLDER: Springer-Verlag Berlin Heidelberg; YEAR: 2014

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:**Source:**

PsycINFO

8. Longitudinal relations between cognitive bias and adolescent alcohol use.**Citation:**

Addictive Behaviors, November 2014(No Pagination Specified), 0306-4603 (Nov 23, 2014)

Author(s):

Janssen, Tim; Larsen, Helle; Vollebergh, Wilma A.M; Wiers, Reinout W

Abstract:

INTRODUCTION: To prospectively predict the development of adolescent alcohol use with alcohol-related cognitive biases, and to predict the development of alcohol-related cognitive biases with aspects of impulsivity. **METHODS:** Data were used from a two-year, four-wave online sample of 378 Dutch young adolescents (mean age 14.9years, 64.8% female). With zero-inflated Poisson regression analysis we prospectively predicted weekly alcohol use using baseline cognitive biases. Additionally, multiple regression analyses were used to prospectively predict the emergence of alcohol-specific cognitive biases by baseline impulsivity and alcohol use. **RESULTS:** Zero-inflated Poisson analyses demonstrated that the Visual Probe Task reliably predicted weekly alcohol use at different time points. Baseline alcohol use and baseline impulsivity measures did generally not predict alcohol-specific cognitive biases. **CONCLUSIONS:** The findings of this study indicated that while certain measures of alcohol-related attentional bias predicted later alcohol use in young adolescents, approach biases did not. Baseline measures of impulsivity and alcohol use did not predict later alcohol-related cognitive biases. We discuss implications for cognitive models on the development of cognitive biases and

their role in early addictive behaviors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings:
Source: PsycINFO
Full Text: Available from *Elsevier* in [Addictive Behaviors](#)

9. Direct regulation of diurnal drd3 expression and cocaine reward by npas2.

Citation: Biological Psychiatry, August 2014(No Pagination Specified), 0006-3223 (Aug 13, 2014)
Author(s): Ozburn, Angela R; Falcon, Edgardo; Twaddle, Alan; Nugent, Alexandria L; Gillman, Andrea G; Spencer, Sade M; Arey, Rachel N; Mukherjee, Shibani; Lyons-Weiler, James; Self, David W; McClung, Colleen A
Abstract: BACKGROUND: Circadian gene disruptions are associated with the development of psychiatric disorders, including addiction. However, the mechanisms by which circadian genes regulate reward remain poorly understood. METHODS: We used mice with a mutation in *Npas2* and adeno-associated virus-short hairpin RNA mediated knockdown of *Npas2* and *Clock* in the nucleus accumbens (NAc). We performed conditioned place preference assays. We utilized cell sorting quantitative real-time polymerase chain reaction, and chromatin immunoprecipitation followed by deep sequencing. RESULTS: *Npas2* mutants exhibit decreased sensitivity to cocaine reward, which is recapitulated with a knockdown of neuronal PAS domain protein 2 (NPAS2) specifically in the NAc, demonstrating the importance of NPAS2 in this region. Interestingly, reducing circadian locomotor output cycles kaput (CLOCK) (a homologue of NPAS2) in the NAc had no effect, suggesting an important distinction in NPAS2 and CLOCK function. Furthermore, we found that NPAS2 expression is restricted to *Drd1* expressing neurons while CLOCK is ubiquitous. Moreover, NPAS2 and CLOCK have distinct temporal patterns of DNA binding, and we identified novel and unique binding sites for each protein. We identified the *Drd3* dopamine receptor as a direct transcriptional target of NPAS2 and found that NPAS2 knockdown in the NAc disrupts its diurnal rhythm in expression. Chronic cocaine treatment likewise disrupts the normal rhythm in *Npas2* and *Drd3* expression in the NAc, which may underlie behavioral plasticity in response to cocaine. CONCLUSIONS: Together, these findings identify an important role for the circadian protein, NPAS2, in the NAc in the regulation of dopamine receptor expression and drug reward. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings:
Source: PsycINFO
Full Text: Available from *Elsevier* in [Schizophrenia Research](#)
 Available from *Elsevier* in [Biological Psychiatry](#)

10. Cocaine triggers epigenetic alterations in the corticostriatal circuit.

Citation: Brain Research, October 2014(No Pagination Specified), 0006-8993 (Oct 6, 2014)
Author(s): Sadri-Vakili, Ghazaleh
Abstract: Acute and repeated exposure to cocaine induces long-lasting alterations in neural networks that underlie compulsive drug seeking and taking. Cocaine exposure triggers complex adaptations in the brain that are mediated by dynamic patterns of gene expression that are translated into enduring changes. Recently, epigenetic modifications have been unveiled as critical mechanisms underlying addiction that contribute to drug-induced plasticity by regulating gene expression. These alterations are also now linked to the heritability of cocaine-induced phenotypes. This review focuses on how changes in the epigenome, such as altered DNA methylation, histone modifications, and microRNAs, regulate transcription of specific genes that contribute to cocaine addiction.

This article is part of a Special Issue entitled Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Brain Research](#)

11. Role of corticostriatal circuits in context-induced reinstatement of drug seeking.

Citation: Brain Research, September 2014(No Pagination Specified), 0006-8993 (Sep 6, 2014)

Author(s): Marchant, Nathan J; Kaganovsky, Konstantin; Shaham, Yavin; Bossert, Jennifer M

Abstract: Drug addiction is characterized by persistent relapse vulnerability during abstinence. In abstinent drug users, relapse is often precipitated by re-exposure to environmental contexts that were previously associated with drug use. This clinical scenario is modeled in preclinical studies using the context-induced reinstatement procedure, which is based on the ABA renewal procedure. In these studies, context-induced reinstatement of drug seeking is reliably observed in laboratory animals that were trained to self-administer drugs abused by humans. In this review, we summarize neurobiological findings from preclinical studies that have focused on the role of corticostriatal circuits in context-induced reinstatement of heroin, cocaine, and alcohol seeking. We also discuss neurobiological similarities and differences in the corticostriatal mechanisms of context-induced reinstatement across these drug classes. We conclude by briefly discussing future directions in the study of context-induced relapse to drug seeking in rat models. Our main conclusion from the studies reviewed is that there are both similarities (accumbens shell, ventral hippocampus, and basolateral amygdala) and differences (medial prefrontal cortex and its projections to accumbens) in the neural mechanisms of context-induced reinstatement of cocaine, heroin, and alcohol seeking. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Brain Research](#)

12. Pharmacological inactivation of the prelimbic cortex emulates compulsive reward seeking in rats.

Citation: Brain Research, October 2014(No Pagination Specified), 0006-8993 (Oct 31, 2014)

Author(s): Limpens, Jules H.W; Damsteegt, Ruth; Broekhoven, Mark H; Voorn, Pieter; Vanderschuren, Louk J.M.J

Abstract: Drug addiction is a chronic, relapsing brain disorder characterized by compulsive drug use. Contemporary addiction theories state that loss of control over drug use is mediated by a combination of several processes, including a transition from goal-directed to habitual forms of drug seeking and taking, and a breakdown of the prefrontally-mediated cognitive control over drug intake. In recent years, substantial progress has been made in the modelling of loss of control over drug use in animal models, but the neural substrates of compulsive drug use remain largely unknown. On the basis of their involvement in goal-directed behaviour, value-based decision making, impulse control and drug seeking behaviour, we identified the prelimbic cortex (PrL) and orbitofrontal cortex (OFC) as candidate regions to be involved in compulsive drug seeking. Using a conditioned suppression model, we have previously shown that prolonged cocaine self-administration reduces the ability of a conditioned aversive stimulus to reduce drug seeking, which may reflect the unflagging pursuit of drugs in human addicts. Therefore, we tested the hypothesis that dysfunction of the PrL and OFC underlies loss of control over drug seeking behaviour, apparent as reduced conditioned suppression. Pharmacological inactivation of the PrL, using the GABA receptor agonists baclofen and muscimol,

reduced conditioned suppression of cocaine and sucrose seeking in animals with limited self-administration experience. Inactivation of the OFC did not influence conditioned suppression, however. These data indicate that reduced neural activity in the PrL promotes persistent seeking behaviour, which may underlie compulsive aspects of drug use in addiction. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Brain Research](#)

13. Chronic methamphetamine abuse and corticostriatal deficits revealed by neuroimaging.

Citation: Brain Research, November 2014(No Pagination Specified), 0006-8993 (Nov 4, 2014)

Author(s): London, Edythe D; Kohno, Milky; Morales, Angelica M; Ballard, Michael E

Abstract: Despite aggressive efforts to contain it, methamphetamine use disorder continues to be major public health problem; and with generic behavioral therapies still the mainstay of treatment for methamphetamine abuse, rates of attrition and relapse remain high. This review summarizes the findings of structural, molecular, and functional neuroimaging studies of methamphetamine abusers, focusing on cortical and striatal abnormalities and their potential contributions to cognitive and behavioral phenotypes that can serve to promote compulsive drug use. These studies indicate that individuals with a history of chronic methamphetamine abuse often display several signs of corticostriatal dysfunction, including abnormal gray- and white-matter integrity, monoamine neurotransmitter system deficiencies, neuroinflammation, poor neuronal integrity, and aberrant patterns of brain connectivity and function, both when engaged in cognitive tasks and at rest. More importantly, many of these neural abnormalities were found to be linked with certain addiction-related phenotypes that may influence treatment response (e.g., poor self-control, cognitive inflexibility, maladaptive decision-making), raising the possibility that they may represent novel therapeutic targets. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Brain Research](#)

14. Effects of ethanol exposure and withdrawal on dendritic morphology and spine density in the nucleus accumbens core and shell.

Citation: Brain Research, October 2014(No Pagination Specified), 0006-8993 (Oct 27, 2014)

Author(s): Peterson, Veronica L; McCool, Brian A; Hamilton, Derek A

Abstract: Exposure to drugs of abuse can result in profound structural modifications on neurons in circuits involved in addiction that may contribute to drug dependence, withdrawal and related processes. Structural alterations on medium spiny neurons (MSNs) of the nucleus accumbens (NAc) have been observed following exposure to and withdrawal from a variety of drugs; however, relatively little is known about the effects of alcohol exposure and withdrawal on structural alterations of NAc MSNs. In the present study male rats were chronically exposed to vaporized ethanol for 10 days and underwent 1 or 7 days of withdrawal after which the brains were processed for Golgi-Cox staining and analysis of dendritic length, branching and spine density. MSNs of the NAc shell and core underwent different patterns of changes following ethanol exposure and withdrawal. At 1 day of withdrawal there were modest reductions in the dendritic length and branching of MSNs in both the core and the shell compared to control animals exposed only to air. At 7 days of withdrawal the length and branching of shell MSNs was reduced, whereas the length

and branching of core MSNs were increased relative to the shell. The density of mature spines was increased in the core at 1 day of withdrawal, whereas the density of less mature spines was increased in both regions at 7 days of withdrawal. Collectively, these observations indicate that MSNs of the NAc core and shell undergo distinct patterns of structural modifications following ethanol exposure and withdrawal suggesting that modifications in dendritic structure in these regions may contribute differentially to ethanol withdrawal. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Brain Research](#)

15. Sex addiction and gambling disorder: Similarities and differences.

Citation: Comprehensive Psychiatry, October 2014(No Pagination Specified), 0010-440X (Oct 8, 2014)

Author(s): Farre, J.M; Fernandez-Aranda, F; Granero, R; Aragay, N; Mallorqui-Bague, N; Ferrer, V; More, A; Bouman, W.P; Arcelus, J; Savvidou, L.G; Penelo, E; Aymami, M.N; Gomez-Pena, M; Gunnard, K; Romaguera, A; Menchon, J.M; Valles, V; Jimenez-Murcia, S

Abstract: OBJECTIVE: Recently, the DSM-5 has developed a new diagnostic category named "Substance-related and Addictive Disorders". This category includes gambling disorder (GD) as the sole behavioral addiction, but does not include sex addiction (SA). The aim of this study is to investigate whether SA should be classified more closely to other behavioral addictions, via a comparison of the personality characteristics and comorbid psychopathology of individuals with SA with those of individuals with GD, which comes under the category of addiction and related disorders. METHOD: The sample included 59 patients diagnosed with SA, who were compared to 2190 individuals diagnosed with GD and to 93 healthy controls. Assessment measures included the Diagnostic Questionnaire for Pathological Gambling, the South Oaks Gambling Screen, the Symptom Checklist-90 Items-Revised and the Temperament and Character Inventory-Revised. RESULTS: No statistically significant differences were found between the two clinical groups, except for socio-economic status. Although statistically significant differences were found between both clinical groups and controls for all scales on the SCL-90, no differences were found between the two clinical groups. The results were different for personality characteristics: logistic regression models showed that sex addictive behavior was predicted by a higher education level and by lower scores for TCI-R novelty-seeking, harm avoidance, persistence and self-transcendence. Being employed and lower scores in cooperativeness also tended to predict the presence of sex addiction. CONCLUSIONS: While SA and GD share some psychopathological and personality traits that are not present in healthy controls, there are also some diagnostic-specific characteristics that differentiate between the two clinical groups. These findings may help to increase our knowledge of phenotypes existing in behavioral addictions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Comprehensive Psychiatry](#)
Available from *ProQuest* in [Comprehensive Psychiatry](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

16. A study investigating the association between compulsive buying with measures of anxiety and obsessive-compulsive behavior among internet shoppers.

- Citation:** Comprehensive Psychiatry, November 2014(No Pagination Specified), 0010-440X (Nov 6, 2014)
- Author(s):** Weinstein, A; Mezig, Hila; Mizrachi, S; Lejoyeux, M
- Abstract:** BACKGROUND: Compulsive buying is a chronic, repetitive behavior that becomes a primary response to negative events and feelings. Compulsive buyers are obsessed by buying and their behavior occurs in response to negative emotions and results in a decrease in the intensity of negative emotions. Euphoria or relief from negative emotions is the most common consequence of compulsive buying. A large number of studies have investigated the association between compulsive buying and anxiety, and some studies have used the Spielberger trait-state anxiety inventory. PROCEDURE: Compulsive buying, state and trait anxiety and general obsessive-compulsive measures were assessed among 120 habitual internet shoppers (2+ times a week, 70 men and 50 women). RESULTS: Results showed that Edwards Compulsive Buying scale measures were associated with Spielberger trait and not state anxiety measures. Spielberger Trait anxiety measures were also correlated with measures of Yale-Brown Obsessive-Compulsive scale (Y-Bocs). Finally, there were no sex differences in this sample. CONCLUSIONS: The results of this study support existing evidence for an association between compulsive buying and anxiety and they will be discussed in view of current research on comorbidity of behavioural addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in [Comprehensive Psychiatry](#)

17. Expression of cloned 6* nicotinic acetylcholine receptors.

- Citation:** Neuropharmacology, October 2014(No Pagination Specified), 0028-3908 (Oct 16, 2014)
- Author(s):** Wang, Jingyi; Kuryatov, Alexander; Lindstrom, Jon
- Abstract:** Nicotinic acetylcholine receptors (AChRs) are ACh-gated ion channels formed from five homologous subunits in subtypes defined by their subunit composition and stoichiometry. Some subtypes readily produce functional AChRs in *Xenopus* oocytes and transfected cell lines. 623* AChRs (subtypes formed from these subunits and perhaps others) are not easily expressed. This may be because the types of neurons in which they are expressed (typically dopaminergic neurons) have unique chaperones for assembling 623* AChRs, especially in the presence of the other AChR subtypes. Because these relatively minor brain AChR subtypes are of major importance in addiction to nicotine, it is important for drug development as well as investigation of their functional properties to be able to efficiently express human 623* AChRs. We review the issues and progress in expressing 6* AChRs. This article is part of a Special Issue entitled 'Nicotinic Acetylcholine Receptor'. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in [Neuropharmacology](#); Note: ; Collection notes: Academic-License. Please note search only titles within the trial dates: 2010 - to-date

18. The nicotinic cholinergic system function in the human brain.

- Citation:** Neuropharmacology, November 2014(No Pagination Specified), 0028-3908 (Nov 6, 2014)
- Author(s):** Nees, Frauke

Abstract: Research on the nicotinic cholinergic system function in the brain was previously mainly derived from animal studies, yet, research in humans is growing. Up to date, findings allow significant advances on the understanding of nicotinic cholinergic effects on human cognition, emotion and behavior using a range of functional brain imaging approaches such as pharmacological functional magnetic resonance imaging or positron emission tomography. Studies provided insights across various mechanistic psychological domains using different tasks as well as at rest in both healthy individuals and patient populations, with so far partly mixed results reporting both enhancements and decrements of neural activity related to the nicotinic cholinergic system. Moreover, studies on the relation between brain structure and the nicotinic cholinergic system add important information in this context. The present review summarizes the current status of human brain imaging studies and presents the findings within a theoretical and clinical perspective as they may be useful not only for an advancement of the understanding of basic nicotinic cholinergic-related mechanisms, but also for the development and integration of psychological and pharmacological treatment approaches. Patterns of functional neuroanatomy and neural circuitry across various cognitive and emotional domains may be used as neuropsychological markers of mental disorders such as addiction, Alzheimer's disease, Parkinson disease or schizophrenia, where nicotinic cholinergic system changes are characteristic. This article is part of a Special Issue entitled 'Nicotinic Acetylcholine Receptor'. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

19. Alcohol sensory processing and its relevance for ingestion.

Citation: Physiology & Behavior, October 2014(No Pagination Specified), 0031-9384 (Oct 7, 2014)

Author(s): Brassler, Susan M; Castro, Norma; Feretic, Brian

Abstract: Alcohol possesses complex sensory attributes that are first detected by the body via sensory receptors and afferent fibers that promptly transmit signals to brain areas involved in mediating ingestive motivation, reinforcement, and addictive behavior. Given that the chemosensory cues accompanying alcohol consumption are among the most intimate, consistent, and immediate predictors of alcohol's postabsorptive effects, with experience these stimuli also gain powerful associative incentive value to elicit craving and related physiologic changes, maintenance of ongoing alcohol use, and reinstatement of drug seeking after periods of abstinence. Despite the above, preclinical research has traditionally dichotomized alcohol's taste and postingestive influences as independent regulators of motivation to drink. The present review summarizes current evidence regarding alcohol's ability to directly activate peripheral and central oral chemosensory circuits, relevance for intake of the drug, and provides a framework for moving beyond a dissociation between the sensory and postabsorptive effects of alcohol to understand their neurobiological integration and significance for alcohol addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

20. The social identity model of cessation maintenance: Formulation and initial evidence.

Citation: Addictive Behaviors, October 2014(No Pagination Specified), 0306-4603 (Oct 30, 2014)

Author(s): Frings, Daniel; Albery, Ian P

Abstract: INTRODUCTION: Group therapy can be highly influential in helping addicts (individuals presenting with problematic addictive behaviors) achieve and maintain cessation. The efficacy of such groups can be understood by the effects they have on members' social identity and also through associated group processes. The current paper introduces the Social Identity Model of Cessation Maintenance (SIMCM). METHODS: The SIMCM outlines how a number of processes (including self/collective efficacy and esteem, normative structure and social support and control) may affect cessation maintenance. It also provides a framework to make predictions about how automatic and/or implicit processes influence the activation of addiction relevant identities through cognitive accessibility and complexity in particular. RESULTS: A review of initial empirical evidence supporting some of the key specified relationships is provided, along with potential applications in therapy settings. CONCLUSIONS: Insights into how SIMCM could be generalized beyond treatment contexts and avenues for future research are outlined. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Addictive Behaviors](#)

21. Less than meets the eye: Reappraising the clinical relevance of attentional bias in addiction.

Citation: Addictive Behaviors, October 2014(No Pagination Specified), 0306-4603 (Oct 14, 2014)

Author(s): Christiansen, Paul; Schoenmakers, Tim M; Field, Matt

Abstract: Recent years have seen an explosion of interest in attentional bias in addiction, particularly its clinical relevance. Specifically, numerous articles claimed to demonstrate either that (1) attentional bias measured in treatment settings could predict subsequent relapse to substance use, or (2) direct modification of attentional bias reduced substance use and improved treatment outcomes. In this paper, we critically evaluate empirical studies that investigated these issues. We show that the evidence regarding both of these claims is decidedly mixed, and that many of the studies that appear to yield positive findings have serious methodological and statistical limitations. We contend that the available literature suggests that attentional bias for drug cues fluctuates within individuals because it is an output of the underlying motivational state at that moment in time, but there is no convincing evidence that it exerts a causal influence on substance use. Future research should make use of experience sampling methodology to characterise the clinical significance of fluctuations in attentional bias over time. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Addictive Behaviors](#)

22. Psychophysiology of pain and opioid use: Implications for managing pain in patients with an opioid use disorder.

Citation: Drug and Alcohol Dependence, November 2014(No Pagination Specified), 0376-8716 (Nov 6, 2014)

Author(s): Wachholtz, Amy; Foster, Simmie; Cheatle, Martin

Abstract: BACKGROUND: Opioid therapy is one component of an effective pain management regimen for patients with chronic pain and the majority of these patients use their medications responsibly. However, there are a growing number of these patients who develop an opioid use disorder and in some cases require opioid replacement therapy. Managing these patients is complex and the underlying mechanisms of pain and addiction

are not well understood. Developing an effective interdisciplinary treatment program for the individual with pain and an opioid use disorder will depend on enhancing our knowledge of the psychophysiology of pain and addiction. **METHOD:** Authors gathered key empirical and theoretical papers examining the psychophysiology of comorbid pain and opioid misuse disorders. **RESULTS:** This article reviews the current theory of the effect of pain on patients with pain and concomitant addiction, the psychophysiology of pain, opioid use and addiction, and future research in this area. **CONCLUSIONS:** Individuals with a history of opioid misuse have greater levels of hyperalgesia which may be due to alterations in psychophysiological pathways. More research is needed into the psychophysiological biomarkers among individuals with comorbid pain and addiction in order to develop better treatment approaches and improve outcomes among this difficult to treat population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Drug and Alcohol Dependence](#)

23. The impact of a housing first randomized controlled trial on substance use problems among homeless individuals with mental illness.

Citation: Drug and Alcohol Dependence, October 2014(No Pagination Specified), 0376-8716 (Oct 28, 2014)

Author(s): Kirst, Maritt; Zerger, Suzanne; Misir, Vachan; Hwang, Stephen; Stergiopoulos, Vicky

Abstract: **BACKGROUND:** There is strong evidence that Housing First interventions are effective in improving housing stability and quality of life among homeless people with mental illness and addictions. However, there is very little evidence on the effectiveness of Housing First in improving substance use-related outcomes in this population. This study uses a randomized control design to examine the effects of scatter-site Housing First on substance use outcomes in a large urban centre. **METHODS:** Substance use outcomes were compared between a Housing First intervention and treatment as usual group in a sample of 575 individuals experiencing homelessness and mental illness, with or without a co-occurring substance use problem, in the At Home/Chez Soi trial in Toronto, Canada. Generalized linear models were used to compare study arms with respect to change in substance use outcomes over time (baseline, 6, 12, 18 and 24 month). **RESULTS:** At 24 months, participants in the Housing First intervention had significantly greater reductions in number of days experiencing alcohol problems and amount of money spent on alcohol than participants in the Treatment as Usual group. No differences between the study arms in illicit drug outcomes were found at 24 months. **CONCLUSIONS:** These findings show that a Housing First intervention can contribute to reductions in alcohol problems over time. However, the lack of effect of the intervention on illicit drug problems suggests that individuals experiencing homelessness, mental illness and drug problems may need additional supports to reduce use. Trial Registration: Current controlled trials ISRCTN42520374. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Drug and Alcohol Dependence](#)

24. Opioid addicted buprenorphine injectors: Drug use during and after 12-weeks of buprenorphine-naloxone or methadone in the republic of georgia.

Citation: Journal of Substance Abuse Treatment, October 2014(No Pagination Specified), 0740-5472 (Oct 22, 2014)

Author(s): Piralishvili, Gvantsa; Otiashvili, David; Sikharulidze, Zura; Kamkamidze, George; Poole, Sabrina; Woody, George E

Abstract: AIMS: The aim of this study is to assess the prevalence of non-opioid drug use among opioid-addicted, buprenorphine injecting individuals in Georgia, during and after a 12-week course of buprenorphine-naloxone (Suboxone) or methadone. METHODS: Randomized controlled trial with daily observed Suboxone or methadone and weekly counseling, urine tests and timeline followback (TLFB) in weeks 0-12 and 20, and the Addiction Severity Index (ASI) at weeks 0, 4, 8, 12, 20. RESULTS: Of the 80 patients (40/group, 4 women), 68 (85%) completed the 12-weeks of study treatment and 66 (82.5%) completed the 20-week follow-up. At baseline, injecting more than one drug in the last 30days was reported by 68.4% of patients in the methadone and 72.5% in the Suboxone groups. Drug use was markedly reduced in both treatment conditions but there were significant differences in the prevalence of specific drugs with more opioid (1.5 vs. 0.2%; $p=0.03$), less amphetamine (0.2 vs. 2.8%; $p<0.001$) and less marijuana (1.7 vs. 10.2%; $p<0.001$) positive urine tests in the methadone vs. Suboxone groups. At the 20-week follow-up, TLFB results on the 34 that continued methadone or the 3 on Suboxone showed less opioid (5.6 vs. 27.6%; $p<0.001$), illicit buprenorphine (2.7 vs. 13.8%; $p=0.005$), benzodiazepine (13.5 vs. 34.5%; $p<0.001$), and marijuana (2.8 vs. 20.7%; $p<0.001$) use than the 29 who did not continue opioid substitution therapy. CONCLUSIONS: Despite small but significant differences in opioid and other drug use, both treatments were highly effective in reducing opioid and non-opioid drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

25. Effect of an organizational linkage intervention on staff perceptions of medication-assisted treatment and referral intentions in community corrections.

Citation: Journal of Substance Abuse Treatment, October 2014(No Pagination Specified), 0740-5472 (Oct 14, 2014)

Author(s): Friedmann, Peter D; Wilson, Donna; Knudsen, Hannah K; Ducharme, Lori J; Welsh, Wayne N; Frisman, Linda; Knight, Kevin; Lin, Hsiu-Ju; James, Amy; Albizu-Garcia, Carmen E; Pankow, Jennifer; Hall, Elizabeth A; Urbine, Terry F; Abdel-Salam, Sami; Duvall, Jamieson L; Vocci, Frank J

Abstract: INTRODUCTION: Medication-assisted treatment (MAT) is effective for alcohol and opioid use disorders but it is stigmatized and underutilized in criminal justice settings. METHODS: This study cluster-randomized 20 community corrections sites to determine whether an experimental implementation strategy of training and an organizational linkage intervention improved staff perceptions of MAT and referral intentions more than training alone. The 3-hour training was designed to address deficits in knowledge, perceptions and referral information, and the organizational linkage intervention brought together community corrections and addiction treatment agencies in an interagency strategic planning and implementation process over 12months. RESULTS: Although training alone was associated with increases in familiarity with pharmacotherapy and knowledge of where to refer clients, the experimental intervention produced significantly greater improvements in functional attitudes (e.g. that MAT is helpful to clients) and referral intentions. Corrections staff demonstrated greater improvements in functional perceptions and intent to refer opioid dependent clients for MAT than did treatment staff. CONCLUSION: Knowledge, perceptions and information training plus interorganizational strategic planning intervention is an effective means to change attitudes and intent to refer clients for medication assisted treatment in community corrections settings, especially among corrections staff. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:**Source:** PsycINFO**Full Text:** Available from *Elsevier* in *Journal of Substance Abuse Treatment***26. The benefits and dangers of flow experience in high school students' internet usage: The role of parental support.****Citation:** Computers in Human Behavior, November 2014(No Pagination Specified), 0747-5632 (Nov 11, 2014)**Author(s):** Yang, Shuiqing; Lu, Yaobin; Wang, Bin; Zhao, Ling**Abstract:** Flow has been identified as a desirable phenomenon because it can lead to a favorable attitude toward specific information technologies. In the present study, we argue that it can also result in potential adverse consequences such as Internet addiction. Based on the flow theory, the present study examines the dual effects of flow experience on high school students' Internet addiction and exploratory behavior. The present study also examines the effects of parental interventions on the dual causal processes. A research model was developed and empirically tested on data collected from 1203 high school students in central China. The structural equation modeling analysis demonstrates that flow experience has positive impacts on both high school students' Internet addiction and exploratory behavior. In addition, parental support significantly lessens high school students' Internet addiction and enhances their exploratory behavior. Theoretical and practical implications are also discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)**Publication Type:** Journal; Peer Reviewed Journal**Subject Headings:****Source:** PsycINFO**27. Smoking automaticity and tolerance moderate brain activation during explore-exploit behavior.****Citation:** Psychiatry Research: Neuroimaging, October 2014(No Pagination Specified), 0925-4927 (Oct 22, 2014)**Author(s):** Addicott, Merideth A; Pearson, John M; Froeliger, Brett; Platt, Michael L; Joseph McClernon, F**Abstract:** The adaptive trade-off between exploration and exploitation is a key component in models of reinforcement learning. Over the past decade, these models have been applied to the study of reward-seeking behavior. Drugs of addiction induce reward-seeking behavior and modify its underlying neurophysiological processes. These neurophysiological changes may underlie a behavioral shift from a flexible, exploratory mode to a focused, exploitative mode, which precedes the development of inflexible, habitual drug use. The goal of this study was to investigate the relationship between explore/exploit behavior and drug addiction by examining the neural correlates of this behavior in cigarette smokers. Participants (n=22) with a range of smoking behaviors completed a smoking dependence motives questionnaire and played a 6-armed bandit task while undergoing functional magnetic resonance imaging (fMRI). Exploratory behavior produced greater activation in the bilateral superior parietal and bilateral frontal cortices than exploitative behavior. Exploitative behavior produced greater activation in the bilateral superior and middle temporal gyri than exploratory behavior. fMRI data and orthogonalized smoking dependence motive scores were entered into multiple linear regression analyses. After controlling for nicotine tolerance, smoking automaticity positively correlated with activation in the same bilateral parietal regions preferentially activated by exploratory choices. These preliminary results link smoking dependence motives to variation in the neural processes that mediate exploratory decision making. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)**Publication Type:** Journal; Peer Reviewed Journal**Subject Headings:****Source:** PsycINFO

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

28. Chronic unilateral stimulation of the nucleus accumbens at high or low frequencies attenuates relapse to cocaine seeking in an animal model.

Citation: Brain Stimulation, October 2014(No Pagination Specified), 1935-861X (Oct 5, 2014)

Author(s): Hamilton, J; Lee, J; Canales, J.J

Abstract: BACKGROUND: Deep brain stimulation (DBS), a form of neurosurgical intervention that is used to modulate the electrophysiological activity of specific brain areas, has emerged as a form of therapy for severe cases of treatment-refractory addiction. OBJECTIVE/HYPOTHESIS: Recent research suggests that the nucleus accumbens (NAC) is a promising target area for DBS in addiction. The current experiments were designed to determine optimal parameters of stimulation and long-term efficacy of NAC DBS in an animal model of cocaine addiction. METHODS: Rats were implanted with a stimulating electrode in the right NAC and exposed to chronic cocaine self-administration (0.5 mg/kg/infusion). Rats underwent drug seeking tests by exposing them to the self-administration context paired with cocaine challenge (5 mg/kg i.p.) on days 1, 15 and 30 after withdrawal from cocaine self-administration. Low-frequency (LF, 20 Hz) or high-frequency (HF, 160 Hz) DBS was applied for 30 min daily for 14 consecutive days starting one day after drug withdrawal. RESULTS: Rats exhibited robust drug-seeking 1, 15 and 30 days after withdrawal from cocaine self-administration, with responding being highest on day 15. Both LF and HF attenuated cocaine seeking on day 15 post-withdrawal by 36 and 48%, respectively. Both forms of stimulation were ineffective on the tests conducted on days 1 and 30. CONCLUSION: The present data showed that unilateral DBS of the NAC effectively attenuated cocaine relapse after 15 days of drug withdrawal, with therapeutic-like effects seemingly diminishing after DBS discontinuation. This evidence provides support for DBS as a promising intervention in intractable cases of stimulant addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Brain Stimulation](#)

29. Using c-fos to study neuronal ensembles in corticostriatal circuitry of addiction.

Citation: Brain Research, November 2014(No Pagination Specified), 0006-8993 (Nov 11, 2014)

Author(s): Cruz, Fabio C; Javier Rubio, F; Hope, Bruce T

Abstract: Learned associations between drugs and environment play an important role in addiction and are thought to be encoded within specific patterns of sparsely distributed neurons called neuronal ensembles. This hypothesis is supported by correlational data from in vivo electrophysiology and cellular imaging studies in relapse models in rodents. In particular, cellular imaging with the immediate early gene c-fos and its protein product Fos has been used to identify sparsely distributed neurons that were strongly activated during conditioned drug behaviors such as drug self-administration and context- and cue-induced reinstatement of drug seeking. Here we review how Fos and the c-fos promoter have been employed to demonstrate causal roles for Fos-expressing neuronal ensembles in prefrontal cortex and nucleus accumbens in conditioned drug behaviors. This work has allowed identification of unique molecular and electrophysiological alterations within Fos-expressing neuronal ensembles that may contribute to the development and expression of learned associations in addiction. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO
Full Text: Available from *Elsevier* in [Brain Research](#)

30. Risk-taking in schizophrenia and controls with and without cannabis dependence.

Citation: Schizophrenia Research, November 2014(No Pagination Specified), 0920-9964 (Nov 22, 2014)

Author(s): Fischer, Bernard A; McMahon, Robert P; Kelly, Deanna L; Wehring, Heidi J; Meyer, Walter A; Feldman, Stephanie; Carpenter, William T; Gorelick, David A

Abstract: BACKGROUND: Risk-based decision making is altered in people with schizophrenia and in people with cannabis use compared to healthy controls; the pattern of risk-assessment in people with co-occurring schizophrenia and cannabis dependence is poorly understood. This study examined measures of risk-taking and decision-making in people with and without schizophrenia and/or cannabis dependence. METHODS: Participants with schizophrenia (n=24), cannabis dependence (n=23), schizophrenia and co-occurring cannabis dependence (n=18), and healthy controls (n=24) were recruited from the community via advertisements and completed a one-visit battery of symptom, risk-based decision making, gambling behavior, cognitive, and addiction assessments. This report presents self-assessments of self-mastery, optimism, impulsivity, and sensation seeking and a behavioral assessment of risk (Balloon Analog Risk Task [BART]). RESULTS: On self-report measures, participants with schizophrenia and co-occurring cannabis dependence were intermediate between those with only cannabis dependence or only schizophrenia on ratings of self-mastery, sensation-seeking, and impulsivity. There were no group differences on ratings of optimism. Their behavior on the BART was most similar to participants with only cannabis dependence or healthy controls, rather than to participants with only schizophrenia. CONCLUSIONS: People with schizophrenia and co-occurring cannabis dependence may represent a unique group in terms of risk-perception and risk-taking. This has implications for interventions designed to influence health behaviors such as motivational interviewing. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

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

31. Parental bonding in subjects with pathological gambling disorder compared with healthy controls.

Citation: Psychiatric Quarterly, December 2014(No Pagination Specified), 0033-2720;1573-6709 (Dec 2, 2014)

Author(s): Villalta, Laia; Arevalo, Ruben; Valdeperez, Ana; Pascual, Juan C; los Cobos, J. Perez

Correspondence Address: Villalta, Laia: Behavioural Addictions Unit, Department of Psychiatry, Santa Creu i Sant Pau Hospital, Av. Sant Antoni M Claret 167, Barcelona, Spain, 08025, villaltalaia@gmail.com

Institution: Behavioural Addictions Unit, Department of Psychiatry, Santa Creu i Sant Pau Hospital, Barcelona, Spain; Behavioural Addictions Unit, Department of Psychiatry, Santa Creu i Sant Pau Hospital, Barcelona, Spain; Behavioural Addictions Unit, Department of Psychiatry, Santa Creu i Sant Pau Hospital, Barcelona, Spain; Behavioural Addictions Unit, Department of Psychiatry, Santa Creu i Sant Pau Hospital, Barcelona, Spain; Behavioural Addictions Unit, Department of Psychiatry, Santa Creu i Sant Pau Hospital, Barcelona, Spain

Abstract: The new Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-V) includes pathological gambling disorder (PGD) in the subgroup of "Addiction and Related Disorders" due to the similarities between PGD and substance-based addictions in neurobiological, psychological, and social risk factors. Family factors as parental

rearing attitudes play a crucial role in the development of substance use disorders and PGD. The aim of the present study was to assess the parental bonding during childhood perceived for adults with PGD compared with healthy controls. Twenty males with PGD and 20 control subjects answered the parental bonding instrument, which measures subjects' recollections of parenting on dimensions of care and protection. Subjects with PGD showed significantly lower maternal and paternal care ($p = 0.016$ and $p = 0.031$, respectively) than controls, and higher paternal protection ($p = 0.003$). The most common parental pattern for PGD subjects was the affectionless control (50 % for the father and 60 % for the mother). Preliminary results suggest that, as previously reported for substance use disorders, an affectionless control parenting style is associated with PGD. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

32. Program capacity to eliminate outcome disparities in addiction health services.

Citation: Administration and Policy in Mental Health and Mental Health Services Research, December 2014(No Pagination Specified), 0894-587X;1573-3289 (Dec 2, 2014)

Author(s): Guerrero, Erick G; Aarons, Gregory A; Grella, Christine E; Garner, Bryan R; Cook, Benjamin; Vega, William A

Correspondence Address: Guerrero, Erick G.: School of Social Work, University of Southern California, 655 West 34th Street, Los Angeles, CA, US, 90089, erickgue@usc.edu

Institution: School of Social Work, University of Southern California, Los Angeles, CA, US; Department of Psychiatry, University of California, San Diego, San Diego, CA, US; Integrated Substance Abuse Programs, Department of Psychiatry & Biobehavioral Sciences, University of California, Los Angeles, Los Angeles, CA, US; Chestnut Health Systems, Normal, IL, US; Department of Psychiatry, Harvard Medical School, Boston, MA, US; School of Social Work, University of Southern California, Los Angeles, CA, US

Abstract: We evaluated program capacity factors associated with client outcomes in publicly funded substance abuse treatment organizations in one of the most populous and diverse regions of the United States. Using multilevel cross-sectional analyses of program data ($n = 97$) merged with client data from 2010 to 2011 for adults ($n = 8,599$), we examined the relationships between program capacity (leadership, readiness for change, and Medi-Cal payment acceptance) and client wait time and treatment duration. Acceptance of Medi-Cal was associated with shorter wait times, whereas organizational readiness for change was positively related to treatment duration. Staff attributes were negatively related to treatment duration. Overall, compared to low program capacity, high program capacity was negatively associated with wait time and positively related to treatment duration. In conclusion, program capacity, an organizational indicator of performance, plays a significant role in access to and duration of treatment. Implications for health care reform implementation in relation to expansion of public health insurance and capacity building to promote health equities are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

33. Multi-dimensional correlates of internet addiction symptoms in adolescents with attention-deficit/hyperactivity disorder.

Citation: Psychiatry Research, November 2014(No Pagination Specified), 0165-1781 (Nov 12, 2014)

Author(s): Chou, Wen-Jiun; Liu, Tai-Ling; Yang, Pinchen; Yen, Cheng-Fang; Hu, Huei-Fan

Abstract: This study examined the associations of the severity of Internet addiction symptoms with reinforcement sensitivity, family factors, Internet activities, and attention-deficit/hyperactivity disorder (ADHD) symptoms among adolescents in Taiwan diagnosed with ADHD. A total of 287 adolescents diagnosed with ADHD and aged between 11 and 18 years participated in this study. Their levels of Internet addiction symptoms, ADHD symptoms, reinforcement sensitivity, family factors, and various Internet activities in which the participants engaged were assessed. The correlates of the severities of Internet addiction symptoms were determined using multiple regression analyses. The results indicated that low satisfaction with family relationships was the strongest factor predicting severe Internet addiction symptoms, followed by using instant messaging, watching movies, high Behavioral Approach System (BAS) fun seeking, and high Behavioral Inhibition System scores. Meanwhile, low paternal occupational SES, low BAS drive, and online gaming were also significantly associated with severe Internet addiction symptoms. Multiple factors are significantly associated with the severity of Internet addiction symptoms among adolescents with ADHD. Clinicians, educational professionals, and parents of adolescents with ADHD should monitor the Internet use of adolescents who exhibit the factors identified in this study. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

34. A generalized matching law analysis of cocaine vs. Food choice in rhesus monkeys: Effects of candidate 'agonist-based' medications on sensitivity to reinforcement.

Citation: Drug and Alcohol Dependence, November 2014(No Pagination Specified), 0376-8716 (Nov 20, 2014)

Author(s): Hutsell, Blake A; Negus, S. Stevens; Banks, Matthew L

Abstract: BACKGROUND: We have previously demonstrated reductions in cocaine choice produced by either continuous 14-day phendimetrazine and d-amphetamine treatment or removing cocaine availability under a cocaine vs. food choice procedure in rhesus monkeys. The aim of the present investigation was to apply the concatenated generalized matching law (GML) to cocaine vs. food choice dose-effect functions incorporating sensitivity to both the relative magnitude and price of each reinforcer. Our goal was to determine potential behavioral mechanisms underlying pharmacological treatment efficacy to decrease cocaine choice. METHODS: A multi-model comparison approach was used to characterize dose- and time-course effects of both pharmacological and environmental manipulations on sensitivity to reinforcement. RESULTS: GML models provided an excellent fit of the cocaine choice dose-effect functions in individual monkeys. Reductions in cocaine choice by both pharmacological and environmental manipulations were principally produced by systematic decreases in sensitivity to reinforcer price and non-systematic changes in sensitivity to reinforcer magnitude. CONCLUSIONS: The modeling approach used provides a theoretical link between the experimental analysis of choice and pharmacological treatments being evaluated as candidate 'agonist-based' medications for cocaine addiction. The analysis suggests that monoamine releaser treatment efficacy to decrease cocaine choice was mediated by selectively increasing the relative price of cocaine. Overall, the net behavioral effect of these pharmacological treatments was to increase substitutability of food pellets, a nondrug reinforcer, for cocaine. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Drug and Alcohol Dependence](#)

35. Nonsupportive parenting affects telomere length in young adulthood among African Americans: Mediation through substance use.

Citation: Journal of Family Psychology, December 2014, vol./is. 28/6(967-972), 0893-3200;1939-1293 (Dec 2014)

Author(s): Beach, Steven R. H; Lei, Man Kit; Brody, Gene H; Yu, Tianyi; Philibert, Robert A

Correspondence Address: Beach, Steven R. H.: Center for Family Research, University of Georgia, 1095 College Station Road, Athens, GA, US, 30602-4527, srhbeach@uga.edu

Institution: Center for Family Research, University of Georgia, Athens, GA, US; Center for Family Research, University of Georgia, Athens, GA, US; Center for Family Research, University of Georgia, Athens, GA, US; Center for Family Research, University of Georgia, Athens, GA, US; Department of Psychiatry, University of Iowa, IA, US

Language: English

Abstract: Telomere length (TL) is an indicator of age-related changes at the cellular level associated with heightened mortality risk. The effect of nonsupportive parenting (NSP) during late adolescence and young adulthood on TL 5 years later was examined in a sample of N = 183 young adult African Americans to determine if effects of NSP on TL were mediated by substance use. Results indicated that the effect of caregiver reported NSP on diminished TL was mediated by escalation of drinking and smoking in young adulthood, even after controlling effects of socioeconomic status risk, gender, BMI, young adult stress, and intervention status. Results suggest that prevention of NSP may influence later physical health consequences by influencing substance use trajectory. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Psychological Association; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Genetics](#)
[*Health](#)
[*Parent Child Relations](#)
[*Parental Involvement](#)
[Blacks](#)

Source: PsycINFO

36. Going grey and getting high.

Citation: PsycCRITIQUES, 2014, vol./is. 59/49(No Pagination Specified), 1554-0138 (2014)

Author(s): Ryan, Tracey Ellen

Language: English

Abstract: Reviews the book, Retirement and the Hidden Epidemic: The Complex Link Between Aging, Work Disengagement, and Substance Misuse-And What to Do About It by Peter A. Bamberger and Samuel B. Bacharach (see record 2014-20297-000). We often think about substance misuse as a problem primarily impacting the young. Bamberger and Bacharach open the eyes of the reader as they argue convincingly of the need for behavioral scientists to pay closer attention to new patterns emerging in the baby boomers and probably upcoming future cohorts of older adults. These patterns increasingly involve the misuse of alcohol along with both prescription and nonprescription drugs among older adults. Overall, the book is extremely well organized, comprehensive, and thought provoking. The authors outline the problem, place it in historical context and provide important background information, such as a detailed description of the specific terms related to substance misuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Electronic Collection

Subject Headings: [*Aging](#)
[*Drug Abuse](#)
[*Epidemics](#)
[Retirement](#)
[Employee Engagement](#)

Source: PsycINFO

37. Comparing attitudes about legal sanctions and teratogenic effects for cocaine, alcohol, tobacco and caffeine: A randomized, independent samples design.

Citation: Substance Abuse Treatment, Prevention, and Policy, February 2006, vol./is. 1/, 1747-597X (Feb 1, 2006)

Author(s): Ginsburg, Harvey J; Raffeld, Paul; Alanis, Kelly L; Boyce, Angela S

Correspondence Address: Ginsburg, Harvey J.: Department of Psychology, Texas State University - San Marcos, San Marcos, TX, US, 78666, hg01@txstate.edu

Institution: Department of Psychology, Texas State University - San Marcos, San Marcos, TX, US;
 Department of Psychology, Texas State University - San Marcos, San Marcos, TX, US;
 Department of Psychology, Texas State University - San Marcos, San Marcos, TX, US;
 Department of Psychology, Texas State University - San Marcos, San Marcos, TX, US

Language: English

Abstract: Background: Establishing more sensible measures to treat cocaine-addicted mothers and their children is essential for improving U.S. drug policy. Favorable post-natal environments have moderated potential deleterious prenatal effects. However, since cocaine is an illicit substance having long been demonized, we hypothesized that attitudes toward prenatal cocaine exposure would be more negative than for licit substances, alcohol, nicotine and caffeine. Further, media portrayals about long-term outcomes were hypothesized to influence viewers' attitudes, measured immediately post-viewing. Reducing popular crack baby stigmas could influence future policy decisions by legislators. Results: Participants in Study 1 imposed significantly greater legal sanctions for cocaine, perceiving prenatal cocaine exposure as more harmful than alcohol, nicotine or caffeine. A one-way ANOVA for independent samples showed significant differences, beyond.0001. Post-hoc Sheffe test illustrated that cocaine was rated differently from other substances. Conclusion: Ratings for prenatal cocaine were more negative than comparable ratings for alcohol, nicotine or caffeine exposure. Stereotypes can be reduced, showing viewers that positive postnatal environments ameliorate potential teratogenic effects of cocaine. Reducing negative stereotypes for crack babies may be a requisite for substantive changes in current policy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Ginsburg et al.; YEAR: 2006

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Drug Laws](#)
[*Drug Usage Attitudes](#)
[*Government Policy Making](#)
[*Prenatal Exposure](#)
[Alcohols](#)
[Caffeine](#)
[Mass Media](#)
[Mothers](#)
[Nicotine](#)
[Stigma](#)

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

Available from *National Library of Medicine* in [Substance Abuse Treatment, Prevention, and Policy](#)

Available from *BioMedCentral* in [Substance Abuse Treatment, Prevention, and Policy](#)

38. Effects of expertise on football betting.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, May 2012, vol./is. 7/, 1747-597X (May 11, 2012)
- Author(s):** Khazaal, Yasser; Chatton, Anne; Billieux, Joel; Bizzini, Lucio; Monney, Gregoire; Fresard, Emmanuelle; Thorens, Gabriel; Bondolfi, Guido; El-Guebaly, Nady; Zullino, Daniele; Khan, Riaz
- Correspondence Address:** Khazaal, Yasser: Geneva University Hospitals, Grand-pre 70 C, Geneva, Switzerland, 1206, yasser.khazaal@hcuge.ch
- Institution:** Geneva University Hospitals, Geneva, Switzerland; Geneva University Hospitals, Geneva, Switzerland; Psychological Sciences Research Institute, Catholic University of Louvain, Louvain-La-Neuve, Belgium; Geneva University Hospitals, Geneva, Switzerland; Addiction Division, University of Calgary, Calgary, Canada; Geneva University Hospitals, Geneva, Switzerland; Geneva University Hospitals, Geneva, Switzerland
- Language:** English
- Abstract:** Background: Football (soccer) is one of the most popular sports in the world, including Europe. It is associated with important betting activities. A common belief, widely spread among those who participate in gambling activities, is that knowledge and expertise on football lead to better prediction skills for match outcomes. If unfounded, however, this belief should be considered as a form of "illusion of control." The aim of this study was to examine whether football experts are better than nonexperts at predicting football match scores. Methods: Two hundred and fifty-eight persons took part in the study: 21.3% as football experts, 54.3% as laypersons (non-initiated to football), and 24.4% as football amateurs. They predicted the scores of the first 10 matches of the 2008 UEFA European Football Championship. Logistic regressions were carried out to assess the link between the accuracy of the forecasted scores and the expertise of the participants (expert, amateur, layperson), controlling for age and gender. Results: The variables assessed did not predict the accuracy of scoring prognosis (R² ranged from 1% to 6%). Conclusions: Expertise, age, and gender did not appear to have an impact on the accuracy of the football match prognoses. Therefore, the belief that football expertise improves betting skills is no more than a cognitive distortion called the "illusion of control." Gamblers may benefit from psychological interventions that target the illusion of control related to their believed links between betting skills and football expertise. Public health policies may need to consider the phenomenon in order to prevent problem gambling related to football betting. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: khazaal et al.; licensee BioMed Central Ltd.; YEAR: 2012
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Experience Level](#)
[*Gambling](#)
[*Soccer](#)
[Addiction](#)
[Pathological Gambling](#)
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

Available from *National Library of Medicine* in *Substance Abuse Treatment, Prevention, and Policy*

Available from *BioMedCentral* in *Substance Abuse Treatment, Prevention, and Policy*

39. The predictive validity of the Drinking-Related Cognitions Scale in alcohol-dependent patients under abstinence-oriented treatment.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, May 2012, vol./is. 7/, 1747-597X (May 4, 2012)
- Author(s):** Sawayama, Toru; Yoneda, Junichi; Tanaka, Katsutoshi; Shirakawa, Norihito; Sawayama, Enami; Ikeda, Taichiro; Higuchi, Susumu; Miyaoka, Hitoshi
- Correspondence Address:** Sawayama, Toru: Department of Psychiatry, Kitasato University School of Medicine, 2-1-1 Asamizodai, Minami-ku, Sagamihara, Kanagawa, Japan, 252-0380, sawayama@kitasato-u.ac.jp
- Institution:** Department of Psychiatry, Kitasato University School of Medicine, Minami-ku, Sagamihara, Kanagawa, Japan; National Hospital Organization Kurihama Alcoholism Center, Yokosuka, Kanagawa, Japan; Department of Occupational Mental Health, Kitasato University Graduate School of Medical Sciences, Minami-ku, Sagamihara, Kanagawa, Japan; Health and Advisory Center for the Well-Being of Spirit and Mind, City of Yokohama, Kohoku-ku, Yokohama, Kanagawa, Japan; Department of Psychiatry, Kitasato University School of Medicine, Minami-ku, Sagamihara, Kanagawa, Japan; Department of Psychiatry, Kitasato University School of Medicine, Minami-ku, Sagamihara, Kanagawa, Japan; National Hospital Organization Kurihama Alcoholism Center, Yokosuka, Kanagawa, Japan; Department of Psychiatry, Kitasato University School of Medicine, Minami-ku, Sagamihara, Kanagawa, Japan
- Language:** English
- Abstract:** Background: Cognitive factors associated with drinking behavior such as positive alcohol expectancies, self-efficacy, perception of impaired control over drinking and perception of drinking problems are considered to have a significant influence on treatment effects and outcome in alcohol-dependent patients. However, the development of a rating scale on lack of perception or denial of drinking problems and impaired control over drinking has not been substantial, even though these are important factors in patients under abstinence-oriented treatment as well as participants in self-help groups such as Alcoholics Anonymous (AA). The Drinking-Related Cognitions Scale (DRCS) is a new self-reported rating scale developed to briefly measure cognitive factors associated with drinking behavior in alcohol-dependent patients under abstinence-oriented treatment, including positive alcohol expectancies, abstinence self-efficacy, perception of impaired control over drinking, and perception of drinking problems. Here, we conducted a prospective cohort study to explore the predictive validity of DRCS. Methods: Participants in this study were 175 middle-aged and elderly Japanese male patients who met the DSM-IV Diagnostic Criteria for Alcohol Dependence. DRCS scores were recorded before and after the inpatient abstinence-oriented treatment program, and treatment outcome was evaluated one year after discharge. Results: Of the 175 participants, 30 were not available for follow-up; thus the number of subjects for analysis in this study was 145. When the total DRCS score and subscale scores were compared before and after inpatient treatment, a significant increase was seen for both scores. Both the total DRCS score and each subscale score were significantly related to total abstinence, percentage of abstinent days, and the first drinking occasion during the one-year post-treatment period. Therefore, good treatment outcome was significantly predicted by low positive alcohol expectancies, high abstinence self-efficacy, high perception level of impaired control over drinking, and high perception level of drinking problems measured by DRCS. Conclusions: The DRCS was considered to have satisfactory predictive validity, which further supports our previous findings. It was suggested that DRCS is a promising rating scale for evaluating multidimensional cognitive factors associated with drinking behavior in alcohol-dependent patients under abstinence-oriented treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Sawayama et al.; licensee BioMed Central Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Attitude Measurement](#)
[*Cognitions](#)
[*Sobriety](#)
[*Test Validity](#)
[Alcohol Drinking Attitudes](#)
[Alcohol Rehabilitation](#)
[Test Reliability](#)

Source: PsycINFO

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

40. The readiness of addiction treatment agencies for health care reform.

Citation: Substance Abuse Treatment, Prevention, and Policy, May 2012, vol./is. 7/, 1747-597X (May 2, 2012)

Author(s): Molfenter, Todd; Capoccia, Victor A; Boyle, Michael G; Sherbeck, Carol K

Correspondence Address: Molfenter, Todd: NIATx, University of Wisconsin-Madison, 1513 University Ave, Madison, WI, US, 53715, todd.molfenter@chess.wisc.edu

Institution: NIATx, University of Wisconsin-Madison, Madison, WI, US; NIATx, University of Wisconsin-Madison, Madison, WI, US; NIATx, University of Wisconsin-Madison, Madison, WI, US; NIATx, University of Wisconsin-Madison, Madison, WI, US

Language: English

Abstract: The Patient Protection and Affordable Care Act (PPACA) aims to provide affordable health insurance and expanded health care coverage for some 32 million Americans. The PPACA makes provisions for using technology, evidence-based treatments, and integrated, patient-centered care to modernize the delivery of health care services. These changes are designed to ensure effectiveness, efficiency, and cost-savings within the health care system. To gauge the addiction treatment field's readiness for health reform, the authors developed a Health Reform Readiness Index (HRRI) survey for addiction treatment agencies. Addiction treatment administrators and providers from around the United States completed the survey located on the www.niatx.net website. Respondents self-assessed their agencies based on 13 conditions pertinent to health reform readiness, and received a confidential score and instant feedback. On a scale of "Needs to Begin," "Early Stages," "On the Way," and "Advanced," the mean scores for respondents (n = 276) ranked in the Early Stages of health reform preparation for 11 of 13 conditions. Of greater concern was that organizations with budgets of < \$5 million (n = 193) were less likely than those with budgets > \$5 million to have information technology (patient records, patient health technology, and administrative information technology), evidence-based treatments, quality management systems, a continuum of care, or a board of directors informed about PPACA. The findings of the HRRI indicate that the addiction field, and in particular smaller organizations, have much to do to prepare for a future environment that has greater expectations for information technology use, a credentialed workforce, accountability for patient care, and an integrated continuum of care. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Molfenter et al.; licensee BioMed Central Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Rehabilitation](#)
[*Organizational Change](#)
[*Readiness to Change](#)
[*Test Construction](#)
[*Health Care Reform](#)
Addiction
Health Care Delivery
Health Care Services
Test Reliability
Test Validity

Source: PsycINFO

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

41. Double jeopardy-Drug and sex risks among Russian women who inject drugs: Initial feasibility and efficacy results of a small randomized controlled trial.

Citation: Substance Abuse Treatment, Prevention, and Policy, January 2012, vol./is. 7/, 1747-597X (Jan 10, 2012)

Author(s): Wechsberg, Wendee M; Krupitsky, Evgeny; Romanova, Tatiana; Zvartau, Edwin; Kline, Tracy L; Browne, Felicia A; Ellerson, Rachel Middlesteadt; Bobashev, Georgiy; Zule, William A; Jones, Hendree E

Correspondence Address: Wechsberg, Wendee M.: RTI International, Research Triangle Park, North Carolina, US, wmw@rti.org

Institution: RTI International, North Carolina, US; Valdman Institute of Pharmacology, Pavlov State Medical University, St. Petersburg, Russia; Valdman Institute of Pharmacology, Pavlov State Medical University, St. Petersburg, Russia; Valdman Institute of Pharmacology, Pavlov State Medical University, St. Petersburg, Russia; RTI International, North Carolina, US; RTI International, North Carolina, US

Language: English

Abstract: Background: With HIV prevalence estimated at 20% among female injecting drug users (IDUs) in St. Petersburg, Russia, there is a critical need to address the HIV risks of this at-risk population. This study characterized HIV risks associated with injecting drug use and sex behaviors and assessed the initial feasibility and efficacy of an adapted Woman-Focused intervention, the Women's CoOp, relative to a Nutrition control to reduce HIV risk behaviors among female IDUs in an inpatient detoxification drug treatment setting. Method: Women (N = 100) were randomized into one of two one-hour long intervention conditions--the Woman-Focused intervention (n = 51) or a time and attention-matched Nutrition control condition (n = 49). Results: The results showed that 57% of the participants had been told that they were HIV-positive. At 3-month follow-up, both groups showed reduced levels of injecting frequency. However, participants in the Woman-Focused intervention reported, on average, a lower frequency of partner impairment at last sex act and a lower average number of unprotected vaginal sex acts with their main sex partner than the Nutrition condition. Conclusion: The findings suggest that improvements in sexual risk reduction are possible for these at-risk women and that more comprehensive treatment is needed to address HIV and drug risks in this vulnerable population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Human Females
*Injections
*Intervention
*Sexual Risk Taking
At Risk Populations
HIV

Source: PsycINFO

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

42. The social production of substance abuse and HIV/HCV risk: An exploratory study of opioid-using immigrants from the former Soviet Union living in New York City.

Citation: Substance Abuse Treatment, Prevention, and Policy, January 2012, vol./is. 7/, 1747-597X (Jan 12, 2012)

Author(s): Guarino, Honoria; Moore, Sarah K; Marsch, Lisa A; Florio, Sal

Correspondence Address: Guarino, Honoria: Center for Technology and Health, National Development and Research Institutes, Inc., 71 W. 23rd St., 8th Fl., New York, NY, US, 10010, guarino@ndri.org

Institution: Center for Technology and Health, National Development and Research Institutes, Inc., New York, NY, US; Center for Technology and Health, National Development and Research Institutes, Inc., New York, NY, US; Center for Technology and Behavioral Health, Dartmouth Psychiatric Research Center, Department of Psychiatry, Dartmouth College, Lebanon, NH, US; Department of Behavioral Health, Chemical Dependency Services, Coney Island Hospital, Brooklyn, NY, US

Language: English

Abstract: Background: Several former Soviet countries have witnessed the rapid emergence of major epidemics of injection drug use (IDU) and associated HIV/HCV, suggesting that immigrants from the former Soviet Union (FSU) may be at heightened risk for similar problems. This exploratory study examines substance use patterns among the understudied population of opioid-using FSU immigrants in the U.S., as well as social contextual factors that may increase these immigrants' susceptibility to opioid abuse and HIV/HCV infection. Methods: In-depth interviews were conducted with 10 FSU immigrants living in New York City who initiated opioid use in adolescence or young adulthood, and with 6 drug treatment providers working with this population. Informed by a grounded theory approach, interview transcripts were inductively coded and analyzed to identify key themes. Results: The "trauma" of the immigration/acclimation experience was emphasized by participants as playing a critical role in motivating opioid use. Interview data suggest that substance use patterns formed in the high-risk environment of the FSU may persist as behavioral norms within New York City FSU immigrant communities - including a predilection for heroin use among youth, a high prevalence of injection, and a tolerance for syringe sharing within substance-using peer

networks. Multiple levels of social context may reproduce FSU immigrants' vulnerability to substance abuse and disease such as: peer-based interactional contexts in which participants typically used opioids; community workplace settings in which some participants were introduced to and obtained opioids; and cultural norms, with roots in Soviet-era social policies, stigmatizing substance abuse which may contribute to immigrants' reluctance to seek disease prevention and drug treatment services. Conclusion: Several behavioral and contextual factors appear to increase FSU immigrants' risk for opioid abuse, IDU and infectious disease. Further research on opioid-using FSU immigrants is warranted and may help prevent increases in HIV/HCV prevalence from occurring within these communities. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*At Risk Populations](#)
[*Drug Abuse](#)
[*Immigration](#)
[*Intravenous Drug Usage](#)
[*Opiates](#)
[Hepatitis](#)
[HIV](#)
[Injections](#)
[Risk Taking](#)
[Urban Environments](#)

Source: PsycINFO

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

43. Substance abuse treatment client experience in an employed population: Results of a client survey.

Citation: Substance Abuse Treatment, Prevention, and Policy, January 2012, vol./is. 7/, 1747-597X (Jan 17, 2012)

Author(s): Merrick, Elizabeth L; Reif, Sharon; Hiatt, Deirdre; Hodgkin, Dominic; Horgan, Constance M; Ritter, Grant

Correspondence Address: Merrick, Elizabeth L.: Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, 415 South Street, MS035, Waltham, MA, US, 02454-9110, merrick@brandeis.edu

Institution: Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Health Net, San Rafael, CA, US; Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US

Language: English

- Abstract:** Background: Understanding client perspectives on treatment is increasingly recognized as key to improving care. Yet information on the perceptions and experiences of workers with private insurance coverage who receive help for substance use conditions is relatively sparse, particularly in managed behavioral health care organization (MBHO) populations. Furthermore, the role of several factors including prior service use has not been fully explored. Methods: Employees covered by a large MBHO who had received substance abuse services in the past year were surveyed (146 respondents completed the telephone survey and self-reported service use). Results: The most common reasons for entering treatment were problems with health; home, family or friends; or work. Prior treatment users reported more reasons for entering treatment and more substance use-related work impairment. The majority of all respondents felt treatment helped a lot or some. One quarter reported getting less treatment than they felt they needed. Discussion and conclusions: Study findings point to the need to tailor treatment for prior service users and to recognize the role of work in treatment entry and outcomes. Perceived access issues may be present even among insured clients already in treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Clients](#)
[*Drug Rehabilitation](#)
[*Employment Status](#)
[Drug Abuse](#)
[Experiences \(Events\)](#)
[Health Care Services](#)
[Health Care Psychology](#)
[Managed Care](#)
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in *Substance Abuse Treatment, Prevention, and Policy*; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in *Substance Abuse Treatment, Prevention and Policy*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in *Substance Abuse Treatment, Prevention, and Policy*
Available from *BioMedCentral* in *Substance Abuse Treatment, Prevention, and Policy*

44. Access to housing subsidies, housing status, drug use and HIV risk among low-income U.S. urban residents.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, November 2011, vol./is. 6/, 1747-597X (Nov 23, 2011)
- Author(s):** Dickson-Gomez, Julia; McAuliffe, Timothy; Convey, Mark; Weeks, Margaret; Owczarzak, Jill
- Correspondence Address:** Dickson-Gomez, Julia: Department of Psychiatry and Behavioral Health, Center for AIDS Intervention Research, Medical College of Wisconsin, 2071 North Summit Avenue, Milwaukee, WI, US, 53202, jdickson@mcw.edu
- Institution:** Department of Psychiatry and Behavioral Health, Center for AIDS Intervention Research, Medical College of Wisconsin, Milwaukee, WI, US; Department of Psychiatry and Behavioral Health, Center for AIDS Intervention Research, Medical College of Wisconsin, Milwaukee, WI, US; Institute for Community Research, Harford, CT, US; Institute for Community Research, Harford, CT, US; Department of Psychiatry and Behavioral Health, Center for AIDS Intervention Research, Medical College of Wisconsin, Milwaukee, WI, US

Language:	English
Abstract:	<p>Background: Much research has shown an association between homelessness and unstable housing and HIV risk but most has relied on relatively narrow definitions of housing status that preclude a deeper understanding of this relationship. Fewer studies have examined access to housing subsidies and supportive housing programs among low-income populations with different personal characteristics. This paper explores personal characteristics associated with access to housing subsidies and supportive housing, the relationship between personal characteristics and housing status, and the relationship between housing status and sexual risk behaviors among low-income urban residents. Methods: Surveys were conducted with 392 low-income residents from Hartford and East Harford, Connecticut through a targeted sampling plan. We measured personal characteristics (income, education, use of crack, heroin, or cocaine in the last 6 months, receipt of welfare benefits, mental illness diagnosis, arrest, criminal conviction, longest prison term served, and self-reported HIV diagnosis); access to housing subsidies or supportive housing programs; current housing status; and sexual risk behaviors. To answer the aims above, we performed univariate analyses using Chi-square or 2-sided ANOVA's. Those with significance levels above (0.10) were included in multivariate analyses. We performed 2 separate multiple regressions to determine the effects of personal characteristics on access to housing subsidies and access to supportive housing respectively. We used multinomial main effects logistic regression to determine the effects of housing status on sexual risk behavior. Results: Being HIV positive or having a mental illness predicted access to housing subsidies and supportive housing, while having a criminal conviction was not related to access to either housing subsidies or supportive housing. Drug use was associated with poorer housing statuses such as living on the street or in a shelter, or temporarily doubling up with friends, acquaintances or sex partners. Living with friends, acquaintances or sex partners was associated with greater sexual risk than those living on the street or in other stable housing situations. Conclusions: Results suggest that providing low-income and supportive housing may be an effective structural HIV prevention intervention, but that the availability and accessibility of these programs must be increased. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)</p>
Country of Publication:	STATEMENT: This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/2.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Dickson-Gomez et al; licensee BioMed Central Ltd.; YEAR: 2011
Publication Type:	Journal; Peer Reviewed Journal
Subject Headings:	<p>*Drug Abuse *Housing *Lower Income Level *Sexual Risk Taking *Urban Environments HIV Living Arrangements</p>
Source:	PsycINFO
Full Text:	<p>Available from <i>Springer NHS Pilot 2014 (NESLi2)</i> in Substance Abuse Treatment, Prevention, and Policy; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from <i>ProQuest</i> in Substance Abuse Treatment, Prevention and Policy; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from <i>National Library of Medicine</i> in Substance Abuse Treatment, Prevention, and Policy Available from <i>BioMedCentral</i> in Substance Abuse Treatment, Prevention, and Policy</p>

45. Arabic validation of the Compulsive Internet Use Scale (CIUS).

- Citation:** Substance Abuse Treatment, Prevention, and Policy, November 2011, vol./is. 6/, 1747-597X (Nov 29, 2011)
- Author(s):** Khazaal, Yasser; Chatton, Anne; Atwi, Khodor; Zullino, Daniele; Khan, Riaz; Billieux, Joel
- Correspondence Address:** Khazaal, Yasser: Department of Mental Health and Psychiatry, Geneva University Hospitals, Geneva, Switzerland, yasser.khazaal@hcuge.ch
- Institution:** Department of Mental Health and Psychiatry, Geneva University Hospitals, Geneva, Switzerland; Department of Mental Health and Psychiatry, Geneva University Hospitals, Geneva, Switzerland; Islamic University, Khaldeh, Lebanon; Department of Mental Health and Psychiatry, Geneva University Hospitals, Geneva, Switzerland; Department of Mental Health and Psychiatry, Geneva University Hospitals, Geneva, Switzerland; Psychological Sciences Research Institute, Catholic University of Louvain-La-Neuve, Kragujevac, Belgium
- Language:** English
- Abstract:** Background: The popularity of using the Internet and related applications has grown in Arabic countries in recent years. Despite numerous advantages in terms of optimizing communications among individuals and social systems, the use of the Internet may in certain cases become problematic and engender negative consequences in daily life. As no instrument in the Arabic language is available, however, to measure excessive Internet use, the goal of the current study was to validate an Arabic version of the Compulsive Internet Use Scale (CIUS). Methods: The Arabic version of the CIUS was administered to a sample of 185 Internet users and exploratory and confirmatory analyses performed. Results: As found previously for the original version, a one-factor model of the CIUS had good psychometric properties and fit the data well. The total score on the CIUS was positively associated with time spent online. Conclusion: The Arabic version of the CIUS seems to be a valid self-report to measure problematic Internet use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Foreign Language Translation](#)
[*Internet](#)
[*Internet Addiction](#)
[*Rating Scales](#)
[Arabs](#)
[Compulsions](#)
[Test Validity](#)
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in [Substance Abuse Treatment, Prevention, and Policy](#) Available from *BioMedCentral* in [Substance Abuse Treatment, Prevention, and Policy](#)

46. Successful and unsuccessful cannabis quitters: Comparing group characteristics and quitting strategies.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, November 2011, vol./is. 6/, 1747-597X (Nov 11, 2011)

Author(s): Rooke, Sally E; Norberg, Melissa M; Copeland, Jan

Correspondence Address: Rooke, Sally E.: National Cannabis Prevention and Information Centre, University of New South Wales, 22-32 King Street, Randwick, Australia, 2031, s.rooke@unsw.edu.au

Institution: National Cannabis Prevention and Information Centre, University of New South Wales, Randwick, NSW, Australia; National Cannabis Prevention and Information Centre, University of New South Wales, Randwick, NSW, Australia; National Cannabis Prevention and Information Centre, University of New South Wales, Randwick, NSW, Australia

Language: English

Abstract: Background: In order to improve treatments for cannabis use disorder, a better understanding of factors associated with successful quitting is required. Method: This study examined differences between successful (n = 87) and unsuccessful (n = 78) cannabis quitters. Participants completed a questionnaire addressing demographic, mental health, and cannabis-related variables, as well as quitting strategies during their most recent quit attempt. Results: Eighteen strategies derived from cognitive behavioral therapy were entered into a principal components analysis. The analysis yielded four components, representing (1) Stimulus Removal, (2) Motivation Enhancement, (3) (lack of) Distraction, and (4) (lack of) Coping. Between groups comparisons showed that unsuccessful quitters scored significantly higher on Motivation Enhancement and (lack of) Coping. This may indicate that unsuccessful quitters focus on the desire to quit, but do not sufficiently plan strategies for coping. Unsuccessful quitters also had significantly more symptoms of depression and stress; less education; lower exposure to formal treatment; higher day-to-day exposure to other cannabis users; and higher cannabis dependence scores. Conclusions: The findings suggest that coping, environmental modification, and co-morbid mental health problems may be important factors to emphasize in treatments for cannabis use disorder. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cannabis](#)
[*Drug Abstinence](#)
[*Strategies](#)
[Disorders](#)
[Drug Abuse](#)
[Mental Health](#)

Source: PsycINFO

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

47. Evidence-informed decision-making by professionals working in addiction agencies serving women: A descriptive qualitative study.

Citation: Substance Abuse Treatment, Prevention, and Policy, November 2011, vol./is. 6/, 1747-597X (Nov 7, 2011)

Author(s): Jack, Susan M; Dobbins, Maureen; Sword, Wendy; Novotna, Gabriela; Brooks, Sandy; Lipman, Ellen L; Niccols, Alison

Correspondence Address: Jack, Susan M.: School of Nursing, McMaster University, Hamilton, OH, Canada, jacksm@mcmaster.ca

Institution: School of Nursing, McMaster University, Hamilton, ON, Canada; School of Nursing, McMaster University, Hamilton, ON, Canada; School of Nursing, McMaster University, Hamilton, ON, Canada; Department of Psychiatry and Behavioural Neurosciences, McMaster University, Hamilton, ON, Canada; School of Nursing, McMaster University, Hamilton, ON, Canada; Offord Centre for Child Studies, Hamilton, ON, Canada; Offord Centre for Child Studies, Hamilton, ON, Canada

Language: English

Abstract: Background: Effective approaches to the prevention and treatment of substance abuse among mothers have been developed but not widely implemented. Implementation studies suggest that the adoption of evidence-based practices in the field of addictions remains low. There is a need, therefore, to better understand decision making processes in addiction agencies in order to develop more effective approaches to promote the translation of knowledge gained from addictions research into clinical practice. Methods: A descriptive qualitative study was conducted to explore: 1) the types and sources of evidence used to inform practice-related decisions within Canadian addiction agencies serving women; 2) how decision makers at different levels report using research evidence; and 3) factors that influence evidence-informed decision making. A purposeful sample of 26 decision-makers providing addiction treatment services to women completed in-depth qualitative interviews. Interview data were coded and analyzed using directed and summative content analysis strategies as well as constant comparison techniques. Results: Across all groups, individuals reported locating and using multiple types of evidence to inform decisions. Some decision-makers rely on their experiential knowledge of addiction and recovery in decision-making. Research evidence is often used directly in decision-making at program management and senior administrative levels. Information for decision-making is accessed from a range of sources, including web-based resources and experts in the field. Individual and organizational facilitators and barriers to using research evidence in decision making were identified. Conclusions: There is support at administrative levels for integrating EIDM in addiction agencies. Knowledge transfer and exchange strategies should be focussed towards program managers and administrators and include capacity building for locating, appraising and using research evidence, knowledge brokering, and for partnering with universities. Resources are required to maintain web-based databases of searchable evidence to facilitate access to research evidence. A need exists to address the perception that there is a paucity of research evidence available to inform program decisions. Finally, there is a need to consider how experiential knowledge influences decision-making and what guidance research evidence has to offer regarding the implementation of different treatment approaches within the field of addictions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Decision Making](#)
[*Drug Rehabilitation](#)
[*Evidence Based Practice](#)
[Addiction](#)
[Drug Abuse](#)
[Organizations](#)

Source: PsycINFO

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

48. Chronic disease and recent addiction treatment utilization among alcohol and drug dependent adults.

Citation: Substance Abuse Treatment, Prevention, and Policy, October 2011, vol./is. 6/, 1747-597X (Oct 18, 2011)

Author(s): Reif, Sharon; Larson, Mary Jo; Cheng, Debbie M; Allensworth-Davies, Donald; Samet, Jeffrey; Saitz, Richard

Correspondence Address: Reif, Sharon: Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, 415 South Street, MS035, Waltham, MA, US, 02454, reif@brandeis.edu

Institution: Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Boston University School of Public Health, Boston, MA, US; Boston University School of Public Health, Boston, MA, US; Boston University School of Public Health, Boston, MA, US; Boston University School of Public Health, Boston, MA, US

Language: English

Abstract: Background: Chronic medical diseases require regular and longitudinal care and self-management for effective treatment. When chronic diseases include substance use disorders, care and treatment of both the medical and addiction disorders may affect access to care and the ability to focus on both conditions. The objective of this paper is to evaluate the association between the presence of chronic medical disease and recent addiction treatment utilization among adults with substance dependence. Methods: Cross-sectional secondary data analysis of self-reported baseline data from alcohol and/or drug-dependent adults enrolled in a randomized clinical trial of a disease management program for substance dependence in primary care. The main independent variable was chronic medical disease status, categorized using the Katz Comorbidity Score as none, single condition of lower severity, or higher severity (multiple conditions or single higher severity condition), based on comorbidity scores determined from self-report. Asthma was also examined in secondary analyses. The primary outcome was any self-reported addiction treatment utilization (excluding detoxification) in the 3 months prior to study entry, including receipt of any addiction-focused counseling or addiction medication from any healthcare provider. Logistic regression models were adjusted for sociodemographics, type of substance dependence, recruitment site, current smoking, and recent anxiety severity. Results: Of 563 subjects, 184 (33%) reported any chronic disease (20% low severity; 13% higher severity) and 111 (20%) reported asthma; 157 (28%) reported any addiction treatment utilization in the past 3 months. In multivariate regression analyses, no significant effect was detected for chronic disease on addiction treatment utilization (adjusted odds ratio [AOR] 0.88 lower severity vs. none, 95% confidence interval (CI): 0.60, 1.28; AOR 1.29 higher severity vs. none, 95% CI: 0.89, 1.88) nor for asthma. Conclusions: In this cohort of alcohol and drug dependent persons, there was no significant effect of chronic medical disease on recent addiction treatment utilization. Chronic disease may not hinder or facilitate connection to addiction treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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original work is properly cited.; HOLDER: Reif et al; licensee BioMed Central Ltd.;
YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Rehabilitation](#)
[*Chronic Illness](#)
[*Drug Rehabilitation](#)
[*Primary Health Care](#)
[Alcohol Abuse](#)
[Alcoholism](#)
[Drug Abuse](#)
[Drug Addiction](#)
[Drug Dependency](#)
[Health Care Utilization](#)

Source: PsycINFO

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

49. The ultimate resistance.

Citation: Journal of Humanistic Psychology, January 2015, vol./is. 55/1(77-101), 0022-1678;1552-650X (Jan 2015)

Author(s): Firestone, Robert W

Correspondence Address: Firestone, Robert W.: Glendon Association, 115 W. Canon Perdido, Santa Barbara, CA, US, 93101, jcatlett@glendon.org

Institution: Glendon Association, Santa Barbara, CA, US

Language: English

Abstract: Although resistance takes many forms, this article elucidates the primary source of resistance in psychotherapy as well as the fundamental resistance to leading a fulfilling life. The ultimate resistance to change, in both cases, originates in the anticipatory fear of arousing existential angst. To varying degrees, most individuals retreat from life and adopt defense mechanisms in an attempt to avoid reawakening suppressed feelings of terror and dread they experienced as children in early separation experiences, and, in particular, when they first learned about death. As clients dismantle their defenses during therapy and move toward increased individuation and self-fulfillment, these unconscious fears threaten to emerge into conscious awareness, and core resistances come into play. Certain events and circumstances, both positive and negative, arouse or intensify latent death anxiety, whereas other circumstances and defenses relieve it. There are numerous defenses that help ameliorate the core anxiety including the fantasy bond—an illusion of connection or fusion with another person, persons, groups, or causes—addictions, microsuicidal behavior, and literal and symbolic methods of denying one's eventual demise. Although these defenses provide a measure of security and a sense of immortality, they adversely affect one's psychological adjustment, emotional well-being, and interpersonal relationships. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Death and Dying](#)
[*Psychotherapeutic Resistance](#)

*Psychotherapy
 *Interpersonal Relationships
 Psychological Theories

Source: PsycINFO

50. Reasons for entering treatment reported by initially treatment-resistant patients with substance use disorders.

Citation: Cognitive Behaviour Therapy, October 2014, vol./is. 43/4(299-309), 1650-6073;1651-2316 (Oct 2014)

Author(s): Meyers, Robert J; Roozen, Hendrik G; Smith, Jane Ellen; Evans, Brittany E

Correspondence Address: Roozen, Hendrik G.: Department of Tranzo, Tilburg University, P.O. Box 90153, Tilburg, Netherlands, 5000 LE, h.g.roozen@uvt.nl

Institution: Department of Psychology, University of New Mexico, Albuquerque, NM, US; Department of Tranzo, Tilburg University, Tilburg, Netherlands; Department of Psychology, University of New Mexico, Albuquerque, NM, US; Faculteit Psychologie en Pedagogiek, Vrije Universiteit Amsterdam, Amsterdam, Netherlands

Language: English

Abstract: Many individuals with substance use disorders are resistant to entering formal treatment, despite the negative consequences that plague their own lives and the lives of concerned significant others (CSOs). Community Reinforcement and Family Training (CRAFT) has been developed as an effective strategy for helping family members who are concerned about the alcohol/drug use of a loved one who refuses to seek treatment. The present study explored reasons and feelings that played a part in these resistant individuals' (identified patients [IPs]) decision to begin treatment. Written statements and feelings of 36 initially treatment-refusing IPs, who were engaged into treatment via their CRAFT-trained CSOs, were examined upon entering treatment. Self-report forms assessed three complementary domains about entering treatment: (1) feelings about coming for treatment, (2) important reasons for entering treatment, and (3) reasons for entering treatment narratives. It was shown that the occurrences of self-reported positive emotions and statements that expressed a positive wish for change outweighed negative feelings and statements. Although conceivably these CRAFT-exposed IPs may have provided different responses than other treatment-seeking populations, the current study's strong IP reports of positive feelings, reasons, and narrative statements regarding treatment entry nonetheless address potential concerns that treatment-refusing IPs might only enter treatment if felt coerced by family members and while experiencing salient negative feelings overall. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Swedish Association for Behaviour Therapy; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Rehabilitation
 *Health Care Seeking Behavior
 *Motivation
 *Treatment Refusal
 *Treatment Resistant Disorders
 Community Mental Health Services
 Drug Abuse
 Evidence Based Practice
 Family Background
 Readiness to Change

Source: PsycINFO

51. Rule breaking mediates the developmental association between GABRA2 and adolescent substance abuse.

Citation: Journal of Child Psychology and Psychiatry, December 2014, vol./is. 55/12(1372-1379), 0021-9630;1469-7610 (Dec 2014)

Author(s): Trucco, Elisa M; Villafuerte, Sandra; Heitzeg, Mary M; Burmeister, Margit; Zucker, Robert A

Correspondence Address: Trucco, Elisa M.: Addiction Research Center, University of Michigan, 4250 Plymouth Road, Ann Arbor, US, 48109-2700

Institution: Addiction Research Center, University of Michigan, Ann Arbor, Ann Arbor, MI, US; Molecular & Behavioral Neuroscience Institute, University of Michigan, Ann Arbor, MI, US; Molecular & Behavioral Neuroscience Institute, University of Michigan, Ann Arbor, MI, US; Addiction Research Center, University of Michigan, Ann Arbor, MI, US; Addiction Research Center, University of Michigan, Ann Arbor, Ann Arbor, MI, US

Language: English

Abstract: Background This study's primary aim was to examine age-specific associations between GABRA2, rule breaking, problematic alcohol use, and substance abuse symptomatology. The secondary aim was to examine the extent to which rule breaking mediates the GABRA2-substance abuse relationship. Methods A sample (n = 518) of primarily male (70.9%) and White (88.8%) adolescents from the Michigan Longitudinal Study was assessed from ages 11-18. Age-specific effects of GABRA2 on rule breaking, problematic alcohol use, and substance abuse symptomatology were examined using nested path models. The role of rule breaking as a mediator in the association between GABRA2 and substance abuse outcomes was tested using prospective cross-lagged path models. Results GABRA2 is significantly ($p < 0.05$) associated with rule breaking in mid- to late-adolescence, but not substance abuse symptomatology across adolescence. GABRA2 effects on problematic alcohol use and substance abuse symptomatology operate largely (45.3% and 71.1%, respectively, $p < 0.05$) via rule breaking in midadolescence. Conclusions GABRA2 represents an early risk factor for an externalizing pathway to the development of problematic alcohol and drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors. Journal of Child Psychology and Psychiatry. Association for Child and Adolescent Mental Health.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*At Risk Populations](#)
[*Drug Abuse](#)
[*Genes](#)
[*Behavioral Genetics](#)
[Behavior Problems](#)
[Risk Factors](#)

Source: PsycINFO

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

52. Most at-risk populations: Contextualising HIV prevention programmes targeting marginalised groups in Zanzibar, Tanzania.

Citation: African Journal of AIDS Research, July 2014, vol./is. 13/3(205-213), 1608-5906;1727-9445 (Jul 2014)

Author(s): Ahmed, Naheed

Correspondence Address: Ahmed, Naheed: Department of Anthropology, University of South Florida, 4202 E. Fowler Avenue, SOC 107, Tampa, FL, US, Naheed.Ahmed8@gmail.com

Institution: Department of Anthropology, University of South Florida, Tampa, FL, US

Language: English

Abstract: According to a 2009 UNAIDS report the HIV/AIDS prevalence rate in Zanzibar, Tanzania, is low in the general population (0.6%), but high among vulnerable groups, specifically sex workers (10.8%), injecting drug users (15.1%), and men who have sex with men (12.3%). In response to this concentrated epidemic, the Government of Zanzibar, international and local non-profit organisations have focused their prevention activities on these marginal populations. Although these efforts are beneficial in terms of

disseminating information about HIV/AIDS and referring clients to health clinics, they fail to address how the socio-economic status of these groups places them at a greater risk for contracting and dying from the virus. Furthermore, there is an absence of qualitative research on these populations which is needed to understand the challenges these groups face and to improve the effectiveness of interventions. Through interviews with employees of government agencies and non-profit organisations, medical professionals, vulnerable populations and HIV/AIDS patients, this paper used a political economy of health and syndemic framework to examine how local realities inform and challenge HIV/AIDS programmes in Zanzibar. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: NISC (Pty) Ltd.
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *AIDS Prevention
 *At Risk Populations
 Anthropology
 Drug Usage
 Economy
 Epidemiology
 NGOs
 Politics
 Prostitution
 Same Sex Intercourse
Source: PsycINFO

53. What do temporal profiles tell us about adolescent alcohol use? Results from a large sample in the United Kingdom.

Citation: Journal of Adolescence, December 2014, vol./is. 37/8(1319-1328), 0140-1971 (Dec 2014)
Author(s): McKay, Michael T; Andretta, James R; Magee, Jennifer; Worrell, Frank C
Correspondence Address: McKay, Michael T., M.T.McKay@ljmu.ac.uk
Institution: Center for Public Health, Liverpool John Moores University, Liverpool, United Kingdom; Child Guidance Clinic, Superior Court of the District of Columbia, DC, US; Faculty of Social Sciences, University of Ulster, United Kingdom; University of California, Berkeley, CA, US
Language: English
Abstract: The psychological construct broadly known as time perspective is potentially useful in understanding a range of adolescent behaviours, including alcohol use. However, the utility of the construct has been hindered by measurement and conceptual problems. To date the vast majority of studies have assessed the relationship between time perspective and other measures in a variable-focussed (correlational) rather than a person-centred way. The present series of studies used a person-centred approach to assess the relationship between temporal profiles and alcohol use in a large sample (n = 1620) of adolescents from High Schools in Northern Ireland. Although a 'Balanced' time perspective has been suggested as optimal, the present study suggests that having a 'Future' temporal profile is associated with less problematic use of alcohol, while having a 'Past Negative' or 'Hedonist' profile is associated with more problematic consumption. Results are discussed in the context of the time perspective and alcohol use literatures. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Published by Elsevier Ltd. All rights reserved.; HOLDER: The Foundation for Professionals in Services for Adolescents; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Adolescent Attitudes
 *Alcoholism
 *Time Perspective
 Psychology

Source: PsycINFO
Full Text: Available from *Elsevier* in *Journal of Adolescence*

54. Craving Facebook? Behavioral addiction to online social networking and its association with emotion regulation deficits.

Citation: Addiction, December 2014, vol./is. 109/12(2079-2088), 0965-2140;1360-0443 (Dec 2014)

Author(s): Hormes, Julia M; Kearns, Brianna; Timko, C. Alix

Correspondence Address: Hormes, Julia M.: Department of Psychology, University at Albany-SUNY, Social Sciences 399, 1400 Washington Ave., Albany, NY, US, 12203, jhormes@albany.edu

Institution: Department of Psychology, University at Albany, State University of New York, Albany, NY, US; Behavioral and Social Sciences Department, University of the Sciences, Philadelphia, PA, US; Behavioral and Social Sciences Department, University of the Sciences, Philadelphia, PA, US

Language: English

Abstract: Aims: To assess disordered online social networking use via modified diagnostic criteria for substance dependence, and to examine its association with difficulties with emotion regulation and substance use. Design: Cross-sectional survey study targeting undergraduate students. Associations between disordered online social networking use, internet addiction, deficits in emotion regulation and alcohol use problems were examined using univariate and multivariate analyses of covariance. Setting: A large University in the Northeastern United States. Participants: Undergraduate students (n = 253, 62.8% female, 60.9% white, age mean = 19.68, standard deviation = 2.85), largely representative of the target population. The response rate was 100%. Measurements: Disordered online social networking use, determined via modified measures of alcohol abuse and dependence, including DSM-IV-TR diagnostic criteria for alcohol dependence, the Penn Alcohol Craving Scale and the Cut-down, Annoyed, Guilt, Eye-opener (CAGE) screen, along with the Young Internet Addiction Test, Alcohol Use Disorders Identification Test, Acceptance and Action Questionnaire-II, White Bear Suppression Inventory and Difficulties in Emotion Regulation Scale. Findings: Disordered online social networking use was present in 9.7% [n = 23; 95% confidence interval (5.9, 13.4)] of the sample surveyed, and significantly and positively associated with scores on the Young Internet Addiction Test (P < 0.001), greater difficulties with emotion regulation (P = 0.003) and problem drinking (P = 0.03). Conclusions: The use of online social networking sites is potentially addictive. Modified measures of substance abuse and dependence are suitable in assessing disordered online social networking use. Disordered online social networking use seems to arise as part of a cluster of symptoms of poor emotion regulation skills and heightened susceptibility to both substance and non-substance addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Craving](#)
[*Emotional Regulation](#)
[*Internet Addiction](#)
[*Online Social Networks](#)
[College Students](#)

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

55. Commentary on Nolan et al. (2014): Opiate substitution treatment and hepatitis C virus prevention: Building an evidence base?

Citation: Addiction, December 2014, vol./is. 109/12(2060-2061), 0965-2140;1360-0443 (Dec 2014)

Author(s): Vickerman, Peter; Page, Kimberly; Maher, Lisa; Hickman, Matthew

Correspondence Address: Vickerman, Peter, Peter.Vickerman@bristol.ac.uk

Institution: School of Social and Community Medicine, University of Bristol, Bristol, United Kingdom; University of New Mexico, Health Sciences Center, Albuquerque, NM, US; Kirby Institute for Infection and Immunity, Faculty of Medicine, UNSW, Sydney, NSW, Australia; School of Social and Community Medicine, University of Bristol, Bristol, United Kingdom

Language: English

Abstract: Comments on an article by Seonaid Nolan et al.(see record 2014-34394-001). The beneficial effects of opiate substitution treatment (OST) for people who inject drugs (PWID) encompass multiple domains and outcomes. However, until recently, the evidence for OST or any harm reduction intervention reducing the risk of hepatitis C virus (HCV) acquisition was classified as insufficient. HCV prevalence remains persistently high in many countries despite high coverage of OST and needle and syringe distribution. It is likely that only by also scaling-up antiviral treatment and prophylactic vaccine development for HCV that prevalence can be significantly reduced. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Therapy](#)
[*Hepatitis](#)
[*Maintenance Therapy](#)
[*Methadone Maintenance](#)

Source: PsycINFO

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

56. Vested interests in addiction research and policy. Alcohol brand sponsorship of events, organizations and causes in the United States, 2010-2013.

Citation: Addiction, December 2014, vol./is. 109/12(1977-1985), 0965-2140;1360-0443 (Dec 2014)

Author(s): Belt, Olivia; Stamatakos, Korene; Ayers, Amanda J; Fryer, Victoria A; Jernigan, David H; Siegel, Michael

Correspondence Address: Siegel, Michael: Department of Community Health Sciences, Boston University School of Public Health, 801 Massachusetts Avenue, 3rd Floor, Boston, MA, US, 02118, mbsiegel@bu.edu

Institution: Department of Community Health Sciences, Boston University School of Public Health, Boston, MA, US; Department of Community Health Sciences, Boston University School of Public Health, Boston, MA, US; Department of Community Health Sciences, Boston University School of Public Health, Boston, MA, US; Department of Community Health Sciences, Boston University School of Public Health, Boston, MA, US; Department of Health, Behavior and Society, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, US; Department of Community Health Sciences, Boston University School of Public Health, Boston, MA, US

Language: English

Abstract: Background and Aims: There has been insufficient research attention to the alcohol industry's use of corporate sponsorship as a marketing tool. This paper provides a systematic investigation of the nature and extent of alcohol sponsorship-at the brand level-in the United States. Methods: The study examined sponsorship of organizations and events in the United States by alcohol brands from 2010 to 2013. The top 75 brands of alcohol consumed by underage drinkers were identified based on a previously conducted national internet-based survey. For each of these brands, a systematic search for sponsorships was conducted using Google. The sponsorships were coded by category

and type of sponsorship. Results: We identified 945 sponsorships during the study period for the top 75 brands consumed by underage drinkers. The most popular youth brands were far more likely to engage in sponsorship and to have a higher number of sponsorships. The identified sponsorships overwhelmingly associated alcohol brands with integral aspects of American culture, including sports, music, the arts and entertainment, and drinking itself. The most popular brands among underage drinkers were much more likely to associate their brands with these aspects of American culture than brands that were less popular among underage drinkers. Conclusions: Alcohol brand sponsorship must be viewed as a major alcohol marketing strategy that generates brand capital through positive associations with integral aspects of culture, creation of attractive brand personalities, and identification with specific market segments. Alcohol research, practice and policy should address this highly prevalent form of alcohol marketing. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohols](#)
[*Brand Names](#)
[*Business](#)
[*Marketing](#)
[Social Processes](#)

Source: PsycINFO

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

57. Response to commentaries.

Citation: *Addiction*, December 2014, vol./is. 109/12(1970-1971), 0965-2140;1360-0443 (Dec 2014)

Author(s): Pollack, Harold; Reuter, Peter

Correspondence Address: Reuter, Peter, preuter@umd.edu

Institution: School of Social Science Administration, University of Chicago, Chicago, IL, US; School of Public Affairs, University of Maryland at College Park, College Park, MD, US

Language: English

Abstract: Reply by the current author to the comments made by Jonathan P. Caulkins (see record 2014-48837-004), by Daniel Mejia (see record 2014-48837-005) and by Vanda Felbab-Brown (see record 2014-48837-006) on the original article (see record 2014-48837-003). The authors thank the commentators for their helpful insights. The aspiration that one can or should fully suppress illicit drug markets imposes a great burden on law enforcement and criminal justice systems. As Caulkins aptly notes: 'Freed of that burden, enforcement can be more focused, more creative, and ultimately more effective'. Felbab-Brown suggests, to go beyond broad policy prescriptions such as 'spray or don't spray' to more targeted choices; spray the 'bad farmers'. Mejia emphasizes technological innovation by growers and smugglers that limits the effectiveness of government interventions. This is a fruitful moment, brought about partly by growing awareness of our collective inability to genuinely suppress illicit drug markets. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Costs and Cost Analysis](#)
[*Drug Legalization](#)
[*Drug Usage](#)
[*Law Enforcement](#)
[*Supply and Demand](#)

Source: PsycINFO

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

58. Calibrating law enforcement and its purpose.

Citation: Addiction, December 2014, vol./is. 109/12(1969-1970), 0965-2140;1360-0443 (Dec 2014)

Author(s): Felbab-Brown, Vanda

Correspondence Address: Felbab-Brown, Vanda, vfelbabbrown@brookings.edu

Institution: Brookings Institution, Washington, DC, US

Language: English

Abstract: Comments on an article by Harold Pollack and Peter Reuter (see record 2014-48837-003). The broader point is that with respect to drugs, and perhaps some other transactional crimes in non depletable resources (thus not including timber and wildlife), enforcement should focus less on the elusive goals of limiting supply and raising costs, but rather on shaping the criminal market. Such selectivity does not imply that traffickers and criminals not exhibiting such characteristics are exempt from targeting, for such a carte blanche approach would be counterproductive. It does mean that the 'bad criminals' are targeted with far greater intensity and vigor to create signals within the market and to shape the behavior of criminal groups toward generating lesser security and social harms. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Costs and Cost Analysis](#)
[*Drug Legalization](#)
[*Drug Usage](#)
[*Law Enforcement](#)
[*Supply and Demand](#)

Source: PsycINFO

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

59. Yet another dimension of the ineffectiveness of supply-side interventions in illegal drug markets.

Citation: Addiction, December 2014, vol./is. 109/12(1968-1969), 0965-2140;1360-0443 (Dec 2014)

Author(s): Mejia, Daniel

Correspondence Address: Mejia, Daniel, dmejia@uniandes.edu.co

Institution: Research Center on Drugs and Security, Universidad de Los Andes, Bogota, Colombia

Language: English

Abstract: Comments on an article by Harold Pollack & Peter Reuter (see record 2014-48837-003). The interesting paper by Harold Pollack & Peter Reuter highlights another dimension of this ineffectiveness: the small (or nil) effects of tougher enforcement on drug prices. Although there has been less attention on this dimension, most of the evidence summarized by Pollack & Reuter shows that there is little evidence in support of the proposition that tougher enforcement will increase prices. Apart from the lack of good data on drug prices, another important challenge not sufficiently highlighted in the paper is the lack of exogenous sources of variation in enforcement measures in order to be able to identify causal effects. Exogenous policy changes are rare events, sometimes even more so than the willingness of policy makers to allow for randomized interventions. Unless increasing prices is not the channel through which tougher enforcement increases violence, this apparent contradiction between the results summarized in Pollack & Reuter and the growing literature on the effects of enforcement against illegal drug markets on violence deserves further exploration. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Costs and Cost Analysis](#)
[*Drug Legalization](#)
[*Drug Usage](#)
[*Law Enforcement](#)
[*Supply and Demand](#)

Source: PsycINFO

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

60. Diminishing returns and great potential: A comment on Pollack & Reuter's review on tougher drug enforcement and prices.

Citation: *Addiction*, December 2014, vol./is. 109/12(1967-1968), 0965-2140;1360-0443 (Dec 2014)

Author(s): Caulkins, Jonathan P

Correspondence Address: Caulkins, Jonathan P.: Heinz College, Carnegie Mellon University, 5000 Forbes Avenue, Pittsburgh, PA, US, 15213, caulkins@andrew.cmu.edu

Institution: Heinz College, Carnegie Mellon University, Pittsburgh, PA, US

Language: English

Abstract: Comments on an article by Harold A. Pollack and Peter Reuter (see record 2014-48837-003). Pollack & Reuter make a valuable contribution by synthesizing the literature assessing the relationship between drug enforcement intensity and prices. Pollack & Reuter note that the evidence base for these conclusions is weak not because the research has been conducted badly, but because the problem is difficult to study and funding for drug policy research is skewed towards studying demand-side interventions. Operationalizing such 'smarter enforcement' strategies may require more police investigation time per arrest than does the current indiscriminate toughness. When it comes to drug law enforcement, doing less across the board could be more, but altering the mix of enforcement tactics may be better still. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Costs and Cost Analysis](#)
[*Drug Legalization](#)
[*Drug Usage](#)
[*Law Enforcement](#)
[*Supply and Demand](#)

Source: PsycINFO

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

61. Does tougher enforcement make drugs more expensive?

Citation: *Addiction*, December 2014, vol./is. 109/12(1959-1966), 0965-2140;1360-0443 (Dec 2014)

Author(s): Pollack, Harold A; Reuter, Peter

Correspondence Address: Reuter, Peter: School of Public Policy, University of Maryland, College Park, MD, US, 20742, preuter@umd.edu

Institution: School of Social Service Administration, University of Chicago, Chicago, IL, US; School of Public Policy, University of Maryland, College Park, MD, US

Language: English

Abstract: Aims: To review empirical research that seeks to relate marginal increases in enforcement against the supply of illicit drugs to changes in drug prices at the level of the drug supply

system being targeted. Method: Review of empirical studies. Findings: Although the fact of prohibition itself raises prices far above those likely to pertain in legal markets, there is little evidence that raising the risk of arrest, incarceration or seizure at different levels of the distribution system will raise prices at the targeted level, let alone retail prices. The number of studies available is small; they use a great variety of outcome and input measures and they all face substantial conceptual and empirical problems. Conclusion: Given the high human and economic costs of stringent enforcement measures, particularly incarceration, the lack of evidence that tougher enforcement raises prices call into question the value, at the margin, of stringent supply-side enforcement policies in high-enforcement nations. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Costs and Cost Analysis](#)
[*Drug Legalization](#)
[*Drug Usage](#)
[*Law Enforcement](#)
[*Supply and Demand](#)

Source: PsycINFO

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

62. The Affordable Care Act will revolutionize care for substance use disorders in the United States.

Citation: *Addiction*, December 2014, vol./is. 109/12(1957-1958), 0965-2140;1360-0443 (Dec 2014)

Author(s): Humphreys, Keith; Frank, Richard G

Correspondence Address: Humphreys, Keith, KNH@Stanford.edu

Institution: Medical Centers, Veterans Affairs Health Care System, Stanford, CA, US; Harvard University, Boston, MA, US

Language: English

Abstract: This editorial discusses The Affordable Care Act and substance use disorders in the United States. The 2010 Affordable Care Act and its extensions of the 2008 Mental Health Parity and Addiction Equity Act will dramatically expand access to substance use disorder care in the United States. The law also has the potential to augment the quality of substance use disorder care and its integration with the rest of the health-care system. Although designed to improve all aspects of the US health care system, the Affordable Care Act will have particularly pronounced benefits for the screening, brief intervention and treatment of substance use disorders. The result should be a far more accessible, coordinated, equitable and high-quality system for responding to one of the nation's most prevalent and destructive health problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Government Policy Making](#)
[*Health Insurance](#)
[Criminal Law](#)
[Quality of Care](#)

Source: PsycINFO

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

63. The paradox of self-surrender and self-empowerment: An investigation of the individual's understanding of the Higher Power in Alcoholics Anonymous.

Citation: Counselling Psychology Review, September 2014, vol./is. 29/3(28-42), 0269-6975 (Sep 2014)

Author(s): Medina, Marc

Correspondence Address: Medina, Marc, marcmedina@btinternet.com

Institution: College of Therapeutic Studies, United Kingdom

Language: English

Abstract: Background: The aim of this study is to examine how long-term recovery from addiction within the Alcoholics Anonymous (AA) paradigm impacts upon the everyday lives of the participants; the choices they make, the difficulties they encounter and their felt sense of personal freedom. The sceptical view of AA is that the price of this recovery is the loss of an independent or strong self that becomes subsumed in the group-think and overtaken by the need to surrender to a Higher Power. Engaging in psychotherapy and attending AA have traditionally been viewed as antithetic, one promoting the strengthening of the self and the other calling for self-surrender. For many long-term sober AA members it is specifically by surrendering themselves that they have been able to regain an independent, responsible and healthy sense of self. The central focus of this research is, therefore, to explore the paradox of self-surrender and self-empowerment at the heart of the AA paradigm and consider its synergy with the outcomes of existential psychotherapy. Method: This qualitative research has sought to understand more about the sober self by interviewing six long-term sober AA members (average length of sobriety 16 years) using semi-structured interviews and analysing the resulting data using Interpretative Phenomenological Analysis (IPA). Findings: The results indicated that rather than losing themselves or their sense of agency, these participants have overcome their alcoholic selves and emerged as more responsible, empowered, connected and free selves. Conclusions: This study contributes towards a deeper understanding of the nature of long-term sobriety as articulated by AA members themselves. Its clinical significance lies in its attempt to increase understanding, specifically amongst existential psychotherapists, regarding the potential congruence of attending AA and engaging in existential psychotherapy and also allowing those in the addiction community to understand more about the parallels that exist between AA and this philosophically grounded branch of psychotherapy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The British Psychological Society

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Alcoholics Anonymous](#)
[*Empowerment](#)
[*Psychotherapy](#)
[Freedom](#)

Source: PsycINFO

64. Seeing is believing: An educational outreach activity on disinfection practices.

Citation: Harm Reduction Journal, February 2008, vol./is. 5/, 1477-7517 (Feb 12, 2008)

Author(s): Mercure, Sarah-Amelie; Tetu, Isabelle; Lamonde, Steeve; Cote, Francoise; Guides de rue working group, PQ, Canada

Correspondence Address: Cote, Francoise: Faculte des Sciences infirmieres, Universite Laval, Pavillon Agathe-Lacerte, Quebec (Qc), Canada, francoise.cote@fsi.ulaval.ca

Corporate/Institutional Author: Guides de rue working group, PQ, Canada

Institution: Faculte des Sciences infirmieres, Universite Laval, Pavillon Agathe-Lacerte, Quebec (Qc), Canada; Programme interfacultaire en Sante Communautaire, Universite Laval, Quebec (Qc), Canada; Point de Reperes, Quebec (Qc), Canada; Faculte des Sciences infirmieres, Universite Laval, Pavillon Agathe-Lacerte, Quebec (Qc), Canada

Language: English

Abstract: Background: Skin and soft-tissue infections are very common among persons who inject drugs. They occur when microbes pass under the protective layer of the skin and proliferate. This happens when harm reduction recommendations such as skin asepsia before injection and sterile injection equipment usage are not properly followed. Methods: A group of active drug users involved in a health promotion project as peer educators were asked about their formation needs. To address their inquiries concerning skin and soft-tissue infections, we devised with them a series of workshops touching upon common infections, the microflora, and microbial transmission. Results: Participants learned to identify common infections and how to properly react in case of an abscess, cellulitis or phlebitis. They saw microscopic objects, found out about the high prevalence of microbes in their environment and on their skin, and could appreciate the efficiency of different washing and disinfection techniques. They visualized how easily microbes can spread from person to person and from contaminated objects to persons. Conclusion: In the weeks following this activity, some participants demonstrated and reported healthy behavioural changes regarding their own injection practices. Furthermore, they shared their newfound knowledge and began enforcing its application among people they inject drugs with. Most participants greatly appreciated this activity and valued it as being highly efficient and tangible. Note: A French version of this paper is available on the Journal's web site [see Additional file 1]. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Harm Reduction](#)
[*Health Education](#)
[*Health Promotion](#)
[*Infectious Disorders](#)
[*Intravenous Drug Usage](#)
[Drug Abuse](#)
[Outreach Programs](#)

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in [Harm Reduction Journal](#)
Available from *BioMedCentral* in [Harm Reduction Journal](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

65. Community-based HIV prevention research among substance-using women in survival sex work: The Maka Project Partnership.

Citation: Harm Reduction Journal, December 2007, vol./is. 4/, 1477-7517 (Dec 8, 2007)

Author(s): Shannon, Kate; Bright, Vicki; Allinott, Shari; Alexson, Debbie; Gibson, Kate; Tyndall, Mark W

Correspondence Address: Shannon, Kate: British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada, kshannon@cfenet.ubc.ca

Institution: British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada; British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada; Sex Workers United Against Violence (SWUAV), Vancouver, Canada; Women's Information Safe Haven (WISH) Drop-In Centre Society, Vancouver, Canada; Women's Information Safe Haven (WISH) Drop-In Centre Society, Vancouver, Canada; British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada

Language: English

Abstract: Substance-using women who exchange sex for money, drugs or shelter as a means of basic subsistence (ie. survival sex) have remained largely at the periphery of HIV and harm reduction policies and services across Canadian cities. This is notwithstanding global evidence of the multiple harms faced by this population, including high rates of violence and poverty, and enhanced vulnerabilities to HIV transmission among women who smoke or inject drugs. In response, a participatory-action research project was developed in partnership with a local sex work agency to examine the HIV-related vulnerabilities, barriers to accessing care, and impact of current prevention and harm reduction strategies among women in survival sex work. This paper provides a brief background of the health and drug-related harms among substance-using women in survival sex work, and outlines the development and methodology of a community-based HIV prevention research project partnership. In doing so, we discuss some of the strengths and challenges of community-based HIV prevention research, as well as some key ethical considerations, in the context of street-level sex work in an urban setting. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Shannon et al.; YEAR: 2007

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Community Services](#)
[*Harm Reduction](#)
[*HIV](#)
[*Human Females](#)
[*Prostitution](#)
[AIDS Prevention](#)
[Drug Abuse](#)
[Urban Environments](#)

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in [Harm Reduction Journal](#)
Available from *BioMedCentral* in [Harm Reduction Journal](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

66. My first time: Initiation into injecting drug use in Manipur and Nagaland, north-east India.

Citation: Harm Reduction Journal, December 2007, vol./is. 4/, 1477-7517 (Dec 5, 2007)

Author(s): Kermode, Michelle; Longleng, Verity; Singh, Bangkim Chingsubam; Hocking, Jane; Langkham, Biangtung; Crofts, Nick

Correspondence Address: Kermode, Michelle: Nossal Institute for Global Health, University of Melbourne, Carlton, VIC, Australia, mkermode@unimelb.edu.au

Institution: Nossal Institute for Global Health, University of Melbourne, Carlton, VIC, Australia; c/- Project ORCHID, CBCNEI Mission Compound, Guwahati, India; c/- Project ORCHID, CBCNEI Mission Compound, Guwahati, India; Key Centre for Women's Health, University of Melbourne, Carlton, VIC, Australia; c/- Project ORCHID, CBCNEI Mission Compound, Guwahati, India; Nossal Institute for Global Health, University of Melbourne, Carlton, VIC, Australia

Language: English

Abstract: Background: The north-east Indian states of Manipur and Nagaland are two of the six high HIV prevalence states in the country, and the main route of HIV transmission is injecting drug use. Understanding the pathways to injecting drug use can facilitate early intervention with HIV prevention programs. While several studies of initiation into injecting drug use have been conducted in developed countries, little is known about the situation in developing country settings. The aim of this study was to increase understanding of the contextual factors associated with initiation into injecting drug use in north-east India, and the influence of these factors on subsequent initiation of others. Method: In mid 2006 a cross-sectional survey among 200 injecting drug users (IDUs) was undertaken in partnership with local NGOs that provide HIV prevention and care services

and advocacy for IDUs in Imphal, Manipur and Dimapur, Nagaland. The questionnaire elicited detailed information about the circumstances of the first injection and the contexts of participants' lives. Demographic information, self-reported HIV status, and details about initiation of others were also recorded. Results: Initiation into injecting drug use occurred at 20 years of age. The drugs most commonly injected were Spasmo-proxyvon (65.5%) and heroin (30.5%). In 53.5% cases, a needle belonging to someone else was used. Two-thirds (66.7%) had used the drug previously, and 91.0% had known other IDUs prior to initiation (mean = 7.5 others). The first injection was usually administered by another person (94.5%), mostly a friend (84.1%). Initiation is a social event; 98% had others present (mean = 2.7 others). Almost 70% of participants had initiated at least one other (mean = 5 others). Initiation of others was independently associated with being male and unemployed; having IDU friends and using alcohol around the time of initiation; and having been taught to inject and not paid for the drug at the time of initiation. Conclusion: Targeting harm reduction messages to (non-injecting) drug users and capitalising on existing IDU social networks to promote safe injecting and deter initiation of others are possible strategies for reducing the impact of injecting drug use and the HIV epidemic in north-east India. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Abuse](#)
[*Injections](#)
[*South Asian Cultural Groups](#)
[Developing Countries](#)
[HIV](#)
[Prevention](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)
Available from *BioMedCentral* in [Harm Reduction Journal](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

67. Long term marijuana users seeking medical cannabis in California (2001-2007): Demographics, social characteristics, patterns of cannabis and other drug use of 4117 applicants.

- Citation:** Harm Reduction Journal, November 2007, vol./is. 4/, 1477-7517 (Nov 3, 2007)
- Author(s):** O'Connell, Thomas J; Bou-Matar, Che B
- Correspondence Address:** O'Connell, Thomas J., tjeffo@comcast.net
- Institution:** Private medical practice, Oakland, CA, US; Private consultant, Mountain View, CA, US
- Language:** English
- Abstract:** Background: Cannabis (marijuana) had been used for medicinal purposes for millennia. Cannabinoid agonists are now attracting growing interest and there is also evidence that botanical cannabis is being used as self-medication for stress and anxiety as well as adjunctive therapy by the seriously ill and by patients with terminal illnesses. California became the first state to authorize medicinal use of cannabis in 1996, and it was recently estimated that between 250,000 and 350,000 Californians may now possess the physician's recommendation required to use it medically. More limited medical use has also been approved in 12 additional states and new initiatives are being considered in others. Despite that evidence of increasing public acceptance of "medical" use, a definitional problem remains and all use for any purpose is still prohibited by federal law. Results: California's 1996 initiative allowed cannabis to be recommended, not only for

serious illnesses, but also "for any other illness for which marijuana provides relief," thus maximally broadening the range of allowable indications. In effect, the range of conditions now being treated with federally illegal cannabis, the modes in which it is being used, and the demographics of the population using it became potentially discoverable through the required screening of applicants. This report examines the demographic profiles and other selected characteristics of 4117 California marijuana users (62% from the Greater Bay Area) who applied for medical recommendations between late 2001 and mid 2007. Conclusion: This study yielded a somewhat unexpected profile of a hitherto hidden population of users of America's most popular illegal drug. It also raises questions about some of the basic assumptions held by both proponents and opponents of current policy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Cannabis](#)
[*Drug Therapy](#)
[*Marijuana Usage](#)
[Drug Usage](#)
[Medicinal Herbs and Plants](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)
Available from *BioMedCentral* in [Harm Reduction Journal](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

68. How high: Quantity as a predictor of cannabis-related problems.

- Citation:** Harm Reduction Journal, May 2008, vol./is. 5/, 1477-7517 (May 29, 2008)
- Author(s):** Walden, Nicole; Earleywine, Mitch
- Correspondence Address:** Earleywine, Mitch: Department of Psychology, University at Albany, State University of New York, 1400 Washington Ave., SS369, Albany, NY, US, 12222, mearleywine@albany.edu
- Institution:** Department of Psychology, University at Albany, State University of New York, Albany, NY, US; Department of Psychology, University at Albany, State University of New York, Albany, NY, US
- Language:** English
- Abstract:** Background: Research on cannabis use has emphasized frequency as a predictor of problems. Studies of other drugs reveal that frequency relates to psychological and physiological outcomes, but quantity also plays an important role. In the study of cannabis, quantity has been difficult to assess due to the wide range of products and means of consumption. Methods: The present study introduces three new measures of quantity, and examines their contribution to cannabis-related problems. Over 5,900 adults using cannabis once or more per month completed an internet survey that inquired about use, dependence, social problems and respiratory health. In addition to detailing their frequency of cannabis use, participants also reported three measures of quantity: number of quarter ounces consumed per month, usual intensity of intoxication, and maximum intensity of intoxication. Results: Frequency of use, monthly consumption, and levels of intoxication predicted respiratory symptoms, social problems and dependence. What is more, each measure of quantity accounted for significant variance in outcomes after controlling for the effects of frequency. Conclusion: These findings indicate that quantity is an important predictor of cannabis-related outcomes, and that the three quantity

measures convey useful information about use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Walden and Earleywine.; YEAR: 2008

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cannabis](#)
[*Drug Dependency](#)
[*Drug Usage](#)
[Physical Health](#)
[Respiration](#)
[Social Issues](#)

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in [Harm Reduction Journal](#)
 Available from *BioMedCentral* in [Harm Reduction Journal](#)
 Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;
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69. Early exit: Estimating and explaining early exit from drug treatment.

Citation: Harm Reduction Journal, April 2008, vol./is. 5/, 1477-7517 (Apr 25, 2008)

Author(s): Stevens, Alex; Radcliffe, Polly; Sanders, Melony; Hunt, Neil

Correspondence Address: Stevens, Alex: EISS, Keynes College, University of Kent, Canterbury, United Kingdom, CT2 7NP, a.w.stevens@kent.ac.uk

Institution: EISS, Keynes College, University of Kent, Canterbury, United Kingdom; EISS, Keynes College, University of Kent, Canterbury, United Kingdom; Melbourne House King's College London, The Institute for Criminal Policy Research, Strand, United Kingdom; EISS, Keynes College, University of Kent, Canterbury, United Kingdom

Language: English

Abstract: Background: Early exit (drop-out) from drug treatment can mean that drug users do not derive the full benefits that treatment potentially offers. Additionally, it may mean that scarce treatment resources are used inefficiently. Understanding the factors that lead to early exit from treatment should enable services to operate more effectively and better reduce drug related harm. To date, few studies have focused on drop-out during the initial, engagement phase of treatment. This paper describes a mixed method study of early exit from English drug treatment services. Methods: Quantitative data (n = 2,624) was derived from three English drug action team areas; two metropolitan and one provincial. Hierarchical linear modelling (HLM) was used to investigate predictors of early-exit while controlling for differences between agencies. Qualitative interviews were conducted with 53 ex-clients and 16 members of staff from 10 agencies in these areas to explore their perspectives on early exit, its determinants and, how services could be improved. Results: Almost a quarter of the quantitative sample (24.5%) dropped out between assessment and 30 days in treatment. Predictors of early exit were: being younger; being homeless; and not being a current injector. Age and injection status were both consistently associated with exit between assessment and treatment entry. Those who were not in substitution treatment were significantly more likely to leave treatment at this stage. There were substantial variations between agencies, which point to the importance of system factors. Qualitative analysis identified several potential ways to improve services. Perceived problems included: opening hours; the service setting; under-utilisation of motivational enhancement techniques; lack of clarity about expectations; lengthy, repetitive assessment procedures; constrained treatment choices; low initial dosing of opioid substitution treatment; and the routine requirement of supervised consumption of methadone. Conclusion: Early exit diminishes the contribution that treatment may make to the reduction of drug related harm. This paper identifies characteristics of people most likely to drop out of treatment prematurely in English drug treatment services and highlights a range of possibilities for improving services. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Stevens et al.; YEAR: 2008

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Client Characteristics](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Treatment Dropouts](#)
[*Treatment Outcomes](#)

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in [Harm Reduction Journal](#)
Available from *BioMedCentral* in [Harm Reduction Journal](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

70. The acceptability and feasibility of peer worker support role in community based HCV treatment for injecting drug users.

Citation: Harm Reduction Journal, February 2008, vol./is. 5/, 1477-7517 (Feb 25, 2008)

Author(s): Norman, Josephine; Walsh, Nick M; Mugavin, Janette; Stoove, Mark A; Kelsall, Jenny; Austin, Kirk; Lintzeris, Nick

Correspondence Address: Walsh, Nick M.: Turning Point Alcohol and Drug Centre, 54 Gertrude St, Fitzroy, VIC, Australia, nmwal2@student.monash.edu

Institution: Turning Point Alcohol and Drug Centre, Fitzroy, VIC, Australia; Turning Point Alcohol and Drug Centre, Fitzroy, VIC, Australia; Turning Point Alcohol and Drug Centre, Fitzroy, VIC, Australia; Turning Point Alcohol and Drug Centre, Fitzroy, VIC, Australia; Turning Point Alcohol and Drug Centre, Fitzroy, VIC, Australia; Turning Point Alcohol and Drug Centre, Fitzroy, VIC, Australia

Language: English

Abstract: Hepatitis C is the most common blood borne virus in Australia affecting over 200 000 people. Effective treatment for hepatitis C has only become accessible in Australia since the late 1990's, although active injecting drug use (IDU) remained an exclusion criteria for government-funded treatment until 2001. Treatment uptake has been slow, particularly among injecting drug users, the largest affected group. We developed a peer-based integrated model of hepatitis C care at a community drug and alcohol clinic. Clients interested and eligible for hepatitis C treatment had their substance use, mental health and other psychosocial comorbidities co-managed onsite at the clinic prior to and during treatment. In a qualitative preliminary evaluation of the project, nine current patients of the clinic were interviewed, as was the clinic peer worker. A high level of patient acceptability of the peer-based model and an endorsement the integrated model of care was found. This paper describes the acceptability of a peer-based integrated model of hepatitis C care by the clients using the service. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Hepatitis](#)
[*Injections](#)
[*Peer Counseling](#)
[*Treatment](#)

[Roles](#)
[Social Support](#)

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in [Harm Reduction Journal](#)
 Available from *BioMedCentral* in [Harm Reduction Journal](#)
 Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;
 Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

71. A qualitative study of career exploration among young adult men with psychosis and co-occurring substance use disorder.

Citation: Journal of Dual Diagnosis, October 2014, vol./is. 10/4(220-225), 1550-4263;1550-4271 (Oct 2014)

Author(s): Luciano, Alison; Carpenter-Song, Elizabeth A

Correspondence Address: Luciano, Alison, 85 Mechanic Street, Lebanon, NH, US, 03766, alison.luciano.gr@dartmouth.edu

Institution: Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US; Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US

Language: English

Abstract: Objective: This article explores the meaning and importance of career exploration and career development in the context of integrated treatment for young adults with early psychosis and substance use disorders (i.e., co-occurring disorders). Methods: Twelve young adult men (aged 18 to 35 years) with co-occurring disorders recruited from an integrated treatment center completed a series of three semi-structured in-depth qualitative interviews. Data were transcribed verbatim and analyzed using thematic analysis. Purposive sampling ensured participants represented a range of substance abuse treatment stages. Results: Participants had a mean age of 26 (SD = 3) and identified as White. Two-thirds of participants (n = 8, 67%) had diagnosed schizophrenia-spectrum disorders, three (25%) had bipolar disorder, and one (8%) had major depression; four (33%) also had a co-occurring anxiety disorder. The most common substance use disorders involved cannabis (n = 8, 67%), cocaine (n = 5, 42%), and alcohol (n = 5, 42%). These young adult men with co-occurring disorders described past jobs that did not align with future goals as frustrating and disempowering, rather than confidence-building. Most young adult participants began actively developing their careers in treatment through future-oriented work or school placements. They pursued ambitious career goals despite sporadic employment and education histories. Treatment engagement and satisfaction appeared to be linked with career advancement prospects. Conclusions: Integrating career planning into psychosocial treatment is a critical task for providers who serve young adults with co-occurring disorders. Whether integrating career planning within early intervention treatment planning will improve clinical, functional, or economic outcomes is a promising area of inquiry for rehabilitation researchers and clinicians. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Career Development](#)
[*Drug Abuse](#)
[*Occupational Guidance](#)
[*Psychosis](#)
[*Treatment](#)
[Dual Diagnosis](#)

Source: PsycINFO

72. Long-term sobriety strategies for men with co-occurring disorders.

- Citation:** Journal of Dual Diagnosis, October 2014, vol./is. 10/4(212-219), 1550-4263;1550-4271 (Oct 2014)
- Author(s):** Luciano, Alison; Bryan, Elisabeth L; Carpenter-Song, Elizabeth A; Woods, Mary; Armstrong, Katherine; Drake, Robert E
- Correspondence Address:** Luciano, Alison: Dartmouth Psychiatric Research Center, Geisel School of Medicine, Dartmouth, Rivermill Commercial Center, 85 Mechanic Street, Suite B4-1, Lebanon, NH, US, 03766, alison.luciano.gr@dartmouth.edu
- Institution:** Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US; Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US; Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US; Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US; Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US; Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH, US
- Language:** English
- Abstract:** Objective: Roughly half of people with severe mental disorders also experience a co-occurring substance use disorder, and recovery from both is a critical objective for health care services. While understanding of abstinence initiation has grown, the strategies people with co-occurring disorders use to maintain sobriety are largely unknown. This article reports strategies for relapse prevention as described by men with co-occurring disorders who achieved one or more years of sobriety. Methods: We analyzed semi-structured interviews conducted with a sample of 12 men with co-occurring psychosis and substance use disorder who achieved and maintained sobriety for at least one year, supplemented with demographic and diagnostic clinical record data. These men were participating in residential or outpatient treatment at a private, nonprofit integrated treatment clinic. Results: The 12 men were primarily Caucasian (91.7%) and unmarried (100%), and their ages ranged from 23 to 42 years. The two most common psychiatric disorders were schizoaffective disorder (n = 4, 33.3%) and bipolar disorder (n = 4, 33.3%), while the two most commonly misused substances were alcohol and cannabis. Qualitative analyses showed that participants maintained sobriety for at least one year by building a supportive community, engaging in productive activities, and carefully monitoring their own attitudes toward substances, mental health, and responsibility. Alcoholics Anonymous might act as a catalyst for building skills. Conclusions: People with co-occurring disorders who achieve sobriety use a variety of self-management strategies to prevent relapse-seeking support, activities, and a healthy mindset. The findings suggest a relapse prevention model that focuses on social networks, role functioning, and self-monitoring and conceptualizes self-care as critical to extending periods of wellness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Taylor & Francis Group, LLC
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Abuse](#)
[*Dual Diagnosis](#)
[*Psychosis](#)
[*Relapse Prevention](#)
[*Sobriety](#)
[Severity \(Disorders\)](#)
- Source:** PsycINFO

73. Online comments on smoking bans in psychiatric hospitals units.

- Citation:** Journal of Dual Diagnosis, October 2014, vol./is. 10/4(204-211), 1550-4263;1550-4271 (Oct 2014)
- Author(s):** Brown-Johnson, Cati G; Sanders-Jackson, Ashley; Prochaska, Judith J

Correspondence Address: Prochaska, Judith J.: Stanford Prevention Research Center, Department of Medicine, Stanford University, Medical School Office Building, X316, 1265 Welch Rd., Stanford, CA, US, 94305-5411, jpro@stanford.edu

Institution: Stanford Prevention Research Center, Department of Medicine, Stanford University, Stanford, CA, US; Stanford Prevention Research Center, Department of Medicine, Stanford University, Stanford, CA, US; Stanford Prevention Research Center, Department of Medicine, Stanford University, Stanford, CA, US

Language: English

Abstract: Objective: Individuals with mental health concerns are disproportionately affected by and suffer the negative consequences of tobacco use disorder, perhaps because smoking has historically been part of psychiatry's culture. In the early 1990s, psychiatric inpatient facilities were exempted from U.S. hospital smoking bans, in response to public outcry with national media attention. Almost 2 decades later, the current study characterizes online conversation about psychiatric hospital smoking bans. Previous commenting studies have demonstrated commenting's negativity, documenting the "nasty effect" wherein negative comments color perceptions of neutral articles. Thus, we focused particular attention on cited barriers to implementing health-positive smoke-free policies. Methods: We collected online comments (N = 261) responding to popular media articles on smoking bans in inpatient psychiatry between 2013 and 2014 and conducted an inductive and exploratory qualitative content analysis. Results: Verifying previous studies documenting the prevalence of negative commenting, of the comments explicitly supporting or refuting psychiatry smoking bans, there were over twice as many con comments (n = 44) than pro (n = 18). Many commenters argued for access to outdoor smoking areas and warned of patient agitation and risk posed to care workers. Identified content themes included psychiatric medication and negative side effects, broken mental health systems and institutions, denigration of the health risks of tobacco in the context of mental illness, typical pro-smoking arguments about "smokers' rights" and alternatives (including e-cigarettes), addiction, and stigma. Conclusions: The current findings provide a platform to begin to understand how people talk about mental health issues and smoking. Our analysis also raised complex issues concerning forces that impact U.S. patients with serious mental illness but over which they have little control, including medication, the U.S. health system, stigma, perceptions that life with chronic serious mental illness is not worth living, and psychological and physical pain of coping with mental illness. In consideration of identified barriers raised in opposition to smoking bans in inpatient psychiatry, efforts should emphasize patient stakeholder involvement; patient, visitor, and staff protection from smoke exposure; the effectiveness of nicotine replacement for managing withdrawal; and the lack of evidence that cigarettes are therapeutic. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Electronic Communication](#)
[*Policy Making](#)
[*Psychiatric Hospitals](#)
[*Smoking Cessation](#)

Source: PsycINFO

74. Remote "hovering" with individuals with psychotic disorders and substance use: Feasibility, engagement, and therapeutic alliance with a text-messaging mobile interventionist.

Citation: Journal of Dual Diagnosis, October 2014, vol./is. 10/4(197-203), 1550-4263;1550-4271 (Oct 2014)

Author(s): Ben-Zeev, Dror; Kaiser, Susan M; Krzos, Izabela

Correspondence Address: Ben-Zeev, Dror: Dartmouth Psychiatric Research Center, 85 Mechanic St., Lebanon, NH, US, 03766, dror.ben-zeev@dartmouth.edu

Institution: Department of Psychiatry, Geisel School of Medicine at Dartmouth, Lebanon, NH, US; Department of Preventive Medicine, Northwestern University, Chicago, IL, US; Thresholds, Chicago, IL, US

Language: English

Abstract: Objective: People with serious mental illnesses and substance abuse problems (i.e., dual diagnosis) constitute a particularly challenging and costly clinical group. This study evaluated the feasibility and acceptability of a novel model of care in which a mobile interventionist used mobile phone text messaging to remotely monitor and provide daily support to individuals with psychotic disorders and substance use. Methods: Seventeen participants with dual diagnosis were enrolled in a 12-week single-arm trial. A clinical social worker served as the mobile interventionist and sent daily text messages to participants' privately owned mobile phones to assess their medication adherence and clinical status. The mobile interventionist provided text-message feedback and support and suggested various coping strategies flexibly, in response to participants' replies to prompts. At the end of the trial, participants completed a usability and satisfaction measure and two self-rated measures of therapeutic alliance with their clinicians. In one version, participants rated their relationship with their mobile interventionist; in the second version, they rated their relationship with their community-based treatment team. Results: Participants received an average of 139 text messages (SD = 37.5) each from the mobile interventionist over the 12-week trial. On average, participants responded to 87% of the mobile interventionist's messages that required a reply. More than 90% of participants thought the intervention was useful and rewarding and that it helped them be more effective and productive in their lives. Participants' assessments of their relationship with the mobile interventionist were positive. Paired-sample t-test found that the therapeutic alliance ratings participants provided for their mobile interventionist were significantly higher than those provided for their community-based treatment team clinicians, who they met with regularly. Conclusions: Our findings suggest that text-message "hovering" can be conducted successfully with individuals with psychotic disorders and substance abuse. Developing a cadre of mobile interventionists who are specifically trained on how to engage patients via mobile devices while adhering to ethical guidelines and regulatory standards may be an effective way to strengthen service delivery models, improve patient outcomes, and reduce costs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Mental Disorders](#)
[*Therapeutic Alliance](#)
[*Cellular Phones](#)
[Electronic Communication](#)
[Intervention](#)

Source: PsycINFO

75. Gender differences in psychotic disorders with concurrent substance use.

Citation: Journal of Dual Diagnosis, October 2014, vol./is. 10/4(177-186), 1550-4263;1550-4271 (Oct 2014)

Author(s): Caton, Carol L. M; Xie, Haiyi; Drake, Robert E; McHugo, Gregory

Correspondence Address: Caton, Carol L. M.: New York State Psychiatric Institute, 1051 Riverside Dr., Unit 56, New York, NY, US, 10032, clc3@columbia.edu

Institution: Columbia University, Department of Psychiatry, New York, NY, US; Department of Psychiatry and Community and Family Medicine, Geisel School of Medicine at Dartmouth, Hanover, NH, US; Department of Psychiatry and Community and Family Medicine, Geisel School of Medicine at Dartmouth, Hanover, NH, US; Department of Psychiatry and Community and Family Medicine, Geisel School of Medicine at Dartmouth, Hanover, NH, US

Language: English

Abstract: Objective: We conducted a comparative analysis of gender differences in patients with primary psychotic disorders with concurrent substance use and in those with substance-induced psychoses. Methods: A total of 385 individuals admitted to psychiatric emergency departments with early-onset psychosis and recent substance use were interviewed at baseline and at six-month intervals for two years. Using a standardized research diagnostic assessment instrument, we classified patients at baseline into primary and substance-induced psychosis groups and analyzed the effects of gender on demographic, family, and clinical characteristics at baseline, the interaction of gender and diagnosis, and gender main effects on illness course, adjustment, and service use over the two-year follow-up period. Results: Women had better premorbid adjustment, less misattribution of symptoms, and a later age at onset of regular drug use compared to men. Women, however, showed greater depression and histories of abuse compared to men. Men had greater arrest histories. No interactions between gender and diagnosis were significant. Both genders in the primary and substance-induced psychosis groups showed clinical and functional improvement over the follow-up period despite the overall minimal use of mental health and substance abuse treatment services. Conclusions: Women and men with psychosis and substance use differ on several dimensions. Our findings suggest the need for gender-specific treatment programming across both diagnostic groups. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: World Congress of Social Psychiatry. 21st. Jul, 2013. Lisbon. Portugal. An earlier version of this manuscript was presented at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Emergency Services](#)
[*Human Sex Differences](#)
[*Psychiatric Patients](#)
[*Psychosis](#)

Source: PsycINFO

76. Compulsivity in anorexia nervosa: A transdiagnostic concept.

Citation: Frontiers in Psychology, July 2014, vol./is. 5/, 1664-1078 (Jul 17, 2014)

Author(s): Godier, Lauren R; Park, Rebecca J

Correspondence Address: Godier, Lauren R.: Oxford Brain-Body Research into Eating Disorders, Department of Psychiatry, University of Oxford, Warneford Hospital, Warneford Lane, Oxford, United Kingdom, OX3 7JX, lauren.godier@psych.ox.ac.uk

Institution: Department of Psychiatry, University of Oxford, Oxford, United Kingdom; Department of Psychiatry, University of Oxford, Oxford, United Kingdom

Language: English

Abstract: The compulsive nature of weight loss behaviors central to anorexia nervosa (AN), such as relentless self-starvation and over-exercise, has led to the suggestion of parallels between AN and other compulsive disorders such as obsessive-compulsive disorder (OCD) and addictions. There is a huge unmet need for effective treatments in AN, which has high rates of morbidity and the highest mortality rate of any psychiatric disorder, yet a grave paucity of effective treatments. Viewing compulsivity as a transdiagnostic concept, seen in various manifestations across disorders, may help delineate the mechanisms responsible for the persistence of AN, and aid treatment development. We explore models of compulsivity that suggest dysfunction in cortico-striatal circuitry underpins compulsive behavior, and consider evidence of aberrancies in this circuitry across disorders. Excessive habit formation is considered as a mechanism by which initially rewarding weight loss behavior in AN may become compulsive over time, and the complex balance between positive and negative reinforcement in this process is considered. The

physiological effects of starvation in promoting compulsivity, positive reinforcement, and habit formation are also discussed. Further research in AN may benefit from a focus on processes potentially underlying the development of compulsivity, such as aberrant reward processing and habit formation. We discuss the implications of a transdiagnostic perspective on compulsivity, and how it may contribute to the development of novel treatments for AN. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Anorexia Nervosa](#)
[*Obsessive Compulsive Disorder](#)
[Addiction](#)
[Habits](#)
[Neurobiology](#)
[Rewards](#)
[Starvation](#)
[Weight Loss](#)

Source: PsycINFO

77. The risky use of new technology among elementary school students: Internet addiction and cyberbullying.

Citation: Hellenic Journal of Psychology, 2014, vol./is. 11/2(83-110), 1790-1391 (2014)

Author(s): Touloupis, Thanos; Athanasiades, Christina

Correspondence Address: Touloupis, Thanos: School of Psychology, Aristotle University of Thessaloniki, Thessaloniki, Greece, 541 24, touloupis@psy.auth.gr

Institution: Aristotle University of Thessaloniki, Thessaloniki, Greece; Aristotle University of Thessaloniki, Thessaloniki, Greece

Language: Greek

Abstract: The study aimed to investigate the risky use of new technology among elementary school students and, more particularly, the frequency of internet addiction and cyberbullying in relation to the students' gender and academic achievement. Four hundred and fifty-two elementary school students of the 6th grade (242 boys, 210 girls) participated in the study-all students attended public schools in the civic area of Thessaloniki and Athens. The students filled in a self-report questionnaire regarding the pathological use of the internet (Internet Addiction Test, Young, 1998) and their participation in incidents of cyberbullying (based on the Cyberbullying Questionnaire, Smith, Mahdavi, Carvalho, & Tippett, 2006). The results showed that the students are involved in both of these situations, which are positively related to each other, however they are not related with students' academic achievement. Regarding gender, it was found that the pathological use of the internet is significantly higher among boys than girls. The results of the present study are a first step towards more relevant research on students of this particular age as well as towards the implementation of preventive programs in elementary schools aiming to the safe use of internet. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Academic Achievement](#)
[*Elementary School Students](#)
[*Elementary Schools](#)
[*Internet Addiction](#)
[*Cyberbullying](#)
[Internet](#)

Source: PsycINFO

78. Death of an alcohol-dependent patient following intentional drug intoxication: Implication of baclofen?

Citation: European Addiction Research, October 2014, vol./is. 20/6(300-304), 1022-6877;1421-9891 (Oct 2014)

Author(s): Pape, Elise; Roman, Emilie; Scala-Bertola, Julien; Thivilier, Carine; Javot, Lucie; Saint-Marcoux, Franck; Jouzeau, Jean Yves; Gambier, Nicolas

Correspondence Address: Scala-Bertola, Julien: Service de Pharmacologie Clinique et Toxicologie, Hopital Central, CHU Nancy, Avenue du Marechal de Lattre de Tassigny, Nancy, France, FR 54000, j.scala-bertola@chu-nancy.fr

Institution: Department of Clinical Pharmacology and Toxicology, CHU Nancy, Nancy, France; Department of Clinical Pharmacology and Toxicology, CHU Nancy, Nancy, France; Department of Clinical Pharmacology and Toxicology, CHU Nancy, Nancy, France; Medical Intensive Care Unit, CHU Nancy, Nancy, France; Pharmacovigilance Center of Lorraine, CHU Nancy, Nancy, France; Department of Pharmacology and Toxicology, CHU Limoges, Limoges, France; Department of Clinical Pharmacology and Toxicology, CHU Nancy, Nancy, France; Department of Clinical Pharmacology and Toxicology, CHU Nancy, Nancy, France

Language: English

Abstract: Used in the treatment of spasticity at low doses, baclofen is also prescribed off-label at high doses for the treatment of alcohol dependence. Several cases of baclofen intoxication have been reported, but only 1 case deals with the treatment of alcohol dependence. Thus, we report the first death in the context of baclofen off-label use of an alcohol-dependent patient with a high blood baclofen concentration after intentional drug intoxication. The safety profile of baclofen in the treatment of alcohol dependence is reviewed and discussed, underlining the obligatory caution that may support any prescription of high doses of baclofen in this off-label indication and especially in patients with concomitant psychiatric disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Baclofen](#)
[*Death and Dying](#)
[*Drug Therapy](#)
[*Toxic Disorders](#)
[Patients](#)
[Side Effects \(Drug\)](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#) ; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

79. Attitudes towards alcohol dependence and affected individuals: Persistence of negative stereotypes and illness beliefs between 1990 and 2011.

Citation: European Addiction Research, October 2014, vol./is. 20/6(293-299), 1022-6877;1421-9891 (Oct 2014)

Author(s): Schomerus, Georg; Matschinger, Herbert; Angermeyer, Matthias C

Correspondence Address: Schomerus, Georg: Department of Psychiatry, University Medicine Greifswald, Rostocker Chaussee 70, Stralsund, Germany, DE 17437, georg.schomerus@uni-greifswald.de

Institution: Department of Psychiatry, University of Greifswald, Greifswald, Germany; Institute of Social Medicine, Occupational Health and Public Health, University of Leipzig, Leipzig, Germany; Center for Public Mental Health, Gosing am Wagram, Austria

Language: English

Abstract: Background: Alcohol dependence is among the most severely stigmatized mental disorders. We examine whether negative stereotypes and illness beliefs related to alcohol dependence have changed between 1990 and 2011. Methods: We used data from two population surveys with identical methodology that were conducted among German citizens aged >18 years, living in the 'old' German states. They were conducted in 1990 and 2011, respectively. In random subsamples (1990: n = 1,022, and 2011: n = 1,167), identical questions elicited agreement with statements regarding alcohol dependence, particularly with regard to the illness definition of alcohol dependence and blame. Results: Overall, agreement with negative stereotypes did not change in the course of 2 decades. About 55% of the respondents agreed that alcohol dependence is an illness like any other, >40% stated that it was a weakness of character and 30% endorsed that those affected are themselves to blame for their problems. Conclusions: It is apparent that promoting an illness concept of alcohol dependence has not been an easy solution to the problem of stigma. We discuss how the normative functions of alcohol dependence stigma might have prevented a reduction of negative stereotypes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Illness Behavior](#)
[*Persistence](#)
[*Public Opinion](#)
[*Stereotyped Behavior](#)
[Alcohol Drinking Attitudes](#)
[Time Series](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#) ; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

80. A predictive microsimulation model to estimate the clinical relevance of reducing alcohol consumption in alcohol dependence.

Citation: European Addiction Research, October 2014, vol./is. 20/6(269-284), 1022-6877;1421-9891 (Oct 2014)

Author(s): Francois, Clement; Laramée, Philippe; Rahhali, Nora; Chalem, Ylana; Aballea, Samuel; Millier, Aurelie; Bineau, Sebastien; Toumi, Mondher; Rehm, Jurgen

Correspondence Address: Francois, Clement: Lundbeck SAS, 37-45 Quai du President Roosevelt, Issy-les-Moulineaux, France, FR 92445, CFR@lundbeck.com

Institution: Lundbeck SAS, Issy-les-Moulineaux, France; Lundbeck SAS, Issy-les-Moulineaux, France; Lundbeck SAS, Issy-les-Moulineaux, France; Lundbeck SAS, Issy-les-Moulineaux, France; Creativ-Ceutical, Paris, France; Creativ-Ceutical, Paris, France; Lundbeck SAS, Issy-les-Moulineaux, France; Universite Claude Bernard Lyon I, Villeurbanne, France; Social and Epidemiological Research Department, Centre for Addiction and Mental Health, University of Toronto, Toronto, ON, Canada

Language: English

Abstract: Background: Alcohol consumption is one of the most important factors for disease and disability in Europe. In clinical trials, nalmefene has resulted in a significant reduction in the number of heavy-drinking days (HDDs) per month and total alcohol consumption (TAC) among alcohol-dependent patients versus placebo. Methods: A microsimulation model was developed to estimate alcohol-attributable diseases and injuries in patients

with alcohol dependence and to explore the clinical relevance of reducing alcohol consumption. Results: For all diseases and injuries considered, the number of events (inpatient episodes) increased with the number of HDDs and TAC per year. The model predicted that a reduction of 20 HDDs per year would result in 941 fewer alcohol-attributable events per 100,000 patients, while a reduction in intake of 3,000 g/year of pure alcohol (ethanol) would result in 1,325 fewer events per 100,000 patients. Conclusion: The potential gains of reducing consumption in alcohol-dependent patients were considerable. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Rehabilitation](#)
[*Alcoholism](#)
[*Clinical Trials](#)
[*Drug Therapy](#)
[*Narcotic Antagonists](#)
[Models](#)
[Simulation](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#) ; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

81. Calling for serial inebriate programs.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(386), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Lippmann, Melanie Jill; Lippmann, Steven Bernard

Correspondence Address: Lippmann, Melanie Jill: Department of Emergency Medicine, Brown University, Alpert Medical School, 55 Claverick St., Providence, RI, US, 02903, mlippmann@lifespan.org

Institution: Department of Emergency Medicine, Brown University, Alpert Medical School, Providence, RI, US; Department of Psychiatry, University of Louisville, Louisville, KY, US

Language: English

Abstract: This letter to the editor calls for comprehensive rehabilitation programs for serial inebriates in order to relieve strains on US medical facilities that are overwhelmed by a heightened reliance on emergency services by this population. This strains health care delivery systems, and an inefficient use of resources results in escalating health care costs. Not a new concern, increasing visits to our nation's emergency departments (EDs) intensifies this trend. Substance abuse contributes significantly to this problem, as affected individuals are disproportionately transported by emergency medical services (EMS) and present to EDs (Dunford et al., 2006; McClure et al., 2009). Regardless of which program development model is used (several are highlighted), existence of an organized program for serial inebriates within a community can reduce "revolving door" presentations by alcohol-dependent persons through the judicial and health care systems (Dunford et al., 2006; McClure et al., 2009). These should result in better care, lower expenses, and a globally improved medical system. Everyone stands to gain. Emergency departments and hospitals are encouraged to work within their local communities to develop and implement similar programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Emergency Services](#)
[*Health Care Services](#)
[*Hospital Programs](#)
[Alcohol Abuse](#)
[Law Enforcement](#)
Source: PsycINFO

82. c-MRI findings after crystal meth abuse.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(384-385), 1932-0620;1935-3227 (Sep-Oct 2014)
Author(s): Mobius, Cornelia; Kustermann, Andreas; Struffert, Tobias; Kornhuber, Johannes; Muller, Helge H
Correspondence Address: Muller, Helge H.: Friedrich- Alexander University Erlangen-Nuremberg, Schwabachanlage 6, Erlangen, Germany, D-91052, helge.mueller@uk-erlangen.de
Institution: Department of Psychiatry, Friedrich-Alexander University Erlangen-Nuremberg, Erlangen, Germany; Department of Psychiatry, Friedrich-Alexander University Erlangen-Nuremberg, Erlangen, Germany; Division of Neuroradiology, Friedrich-Alexander University Erlangen-Nuremberg, Erlangen, Germany; Department of Psychiatry, Friedrich-Alexander University Erlangen-Nuremberg, Erlangen, Germany; Department of Psychiatry, Friedrich-Alexander University Erlangen-Nuremberg, Erlangen, Germany
Language: English
Abstract: We describe a case of intoxication with N-methylamphetamine (Crystal-METH) after withdrawal. Crystal-METH abuse was associated with persisting neurological symptoms and impressive structural white matter alterations. Magnetic resonance imaging should be recommended to document the possible extensive changes in amphetamine abuse, which increases dramatically. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: American Society of Addiction Medicine; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Amphetamine](#)
[*Drug Abuse](#)
[*Drug Withdrawal](#)
[*Magnetic Resonance Imaging](#)
[*White Matter](#)
[Toxic Disorders](#)
Source: PsycINFO

83. Cocaine and cognition: A systematic quantitative review.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(368-376), 1932-0620;1935-3227 (Sep-Oct 2014)
Author(s): Potvin, Stephane; Stavro, Katherine; Rizkallah, Elie; Pelletier, Julie
Correspondence Address: Potvin, Stephane: Centre de Recherche, Institut Universitaire en Sante Mentale de Montreal, 7331 Hochelaga, Montreal, PQ, Canada, H1N 3V2, stephane.potvin@umontreal.ca
Institution: Department of Psychiatry, Faculty of Medicine, Centre de Recherche, Institut Universitaire en Sante Mentale de Montreal, University of Montreal, Montreal, PQ, Canada; Department of Psychiatry, Faculty of Medicine, Centre de Recherche, Institut Universitaire en Sante Mentale de Montreal, University of Montreal, Montreal, PQ,

Canada; Department of Psychiatry, Faculty of Medicine, Centre de Recherche, Institut Universitaire en Sante Mentale de Montreal, University of Montreal, Montreal, PQ, Canada; Department of Psychiatry, Faculty of Medicine, Institut Universitaire en Sante Mentale de Montreal, University of Montreal, Montreal, PQ, Canada

Language: English

Abstract: Background: Cocaine use disorder is associated with cognitive deficits. However, the literature remains somewhat ambiguous with respect to which distinct cognitive functions are the most impaired in cocaine use disorder and to how duration of abstinence affects cognitive recovery. Here, we performed a meta-analysis to determine the cognitive domains impaired in cocaine abuse/dependence and the duration of abstinence necessary to achieve cognitive recovery. Methods: A literature search yielded 46 studies that assessed cognitive dysfunction in subjects with cocaine abuse/dependence. Effect-size estimates were calculated using the Comprehensive Meta-Analysis V2, for the following 11 cognitive domains: attention, executive functions, impulsivity, speed of processing, verbal fluency/language, verbal learning and memory, visual learning and memory, visuospatial abilities, and working memory. Within these 11 domains, effect-size estimates were calculated on the basis of abstinence duration: short- (positive for drugs urine screening), intermediate- (< 12 weeks), and long-term (> 20 weeks) abstinence. Results: Findings revealed moderate impairment across 8 cognitive domains during intermediate abstinence. The most impaired domains were attention, impulsivity, verbal learning/memory, and working memory. For some domains (attention, speed of processing, and verbal learning/memory), impairments were smaller during short-term abstinence than during intermediate abstinence. Finally, small effect-size estimates were found for long-term abstinence. Discussion: These results suggest significant impairment across multiple cognitive domains in cocaine abusers, and that some of these deficits may be partially masked by the residual or acute withdrawal effects of cocaine. Cognitive dysfunctions remain stable during the first months of abstinence and may abate after 5 months of sobriety. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Cognitive Impairment](#)
[*Cognitive Rehabilitation](#)
[*Drug Abstinence](#)
[*Drug Abuse](#)
[Recovery \(Disorders\)](#)

Source: PsycINFO

84. The prevalence of cannabis withdrawal and its influence on adolescents' treatment response and outcomes: A 12-month prospective investigation.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(359-367), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Greene, M. Claire; Kelly, John F

Correspondence Address: Greene, M. Claire: Center forAddictionMedicine, Department of Psychiatry, Massachusetts General Hospital, 60 Staniford St., Boston, MA, US, 02114, mgree116@jhu.edu

Institution: Center for Addiction Medicine, Department of Psychiatry, Massachusetts General Hospital, Boston, MA, US; Center for Addiction Medicine, Department of Psychiatry, Massachusetts General Hospital, Boston, MA, US

Language: English

Abstract: Background: Withdrawal, a diagnostic indicator of cannabis use disorder, is often minimized or ignored as a consequence of cannabis use, particularly among adolescents. This study aims to characterize cannabis withdrawal among adolescents in outpatient

treatment for substance use disorder and evaluate the clinical significance of withdrawal as a predictor of substance-related outcomes. Methods: Adolescent outpatients (N = 127) reporting cannabis as their drug of choice (n = 90) were stratified by the presence of withdrawal and compared on demographic and clinical variables at treatment intake. Hierarchical linear models compared the effect of withdrawal on percentage days abstinent (PDA) and related outcomes over a 1-year follow-up period. Results: Adolescents reporting withdrawal (40%) were more likely to meet criteria for cannabis dependence, have higher levels of substance use severity, report more substance-related consequences, and have a mood disorder. Withdrawal was not associated with PDA over the follow-up period; however, this relationship was moderated by problem recognition such that adolescents reporting withdrawal and a drug problem improved at a greater rate with respect to PDA than those who did not recognize a problem with drugs and did not report withdrawal. Discussion: Withdrawal is common among adolescent outpatients and is associated with a more clinically severe profile. In this sample, all adolescents reporting withdrawal met criteria for cannabis dependence, suggesting that withdrawal is a highly specific indicator of cannabis use disorder. Although withdrawal does not seem to be independently associated with substance use outcomes posttreatment, moderating factors such as drug problem recognition should be taken into account when formulating treatment and continuing care plans. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Psychiatry](#)
[*Cannabis](#)
[*Drug Addiction](#)
[*Drug Withdrawal](#)
[*Treatment Outcomes](#)
[Drug Abuse](#)
[Drug Rehabilitation](#)
[Marijuana](#)
[Outpatient Treatment](#)

Source: PsycINFO

85. Sex differences in first-admission psychiatric inpatients with and without a comorbid substance use disorder.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(351-358), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Gramaglia, Carla; Bert, Fabrizio; Lombardi, Ada; Feggi, Alessandro; Porro, Marica; Siliquini, Roberta; Gualano, Maria Rosaria; Torre, Eugenio; Zeppegno, Patrizia

Correspondence Address: Zeppegno, Patrizia: Department of Translational Medicine, Institute of Psychiatry, Universita del Piemonte Orientale "Amedeo Avogadro", Via Mazzini n.18, Novara, Italy, 28100, patrizia.zeppegno@med.unipmn.it

Institution: Department of Translational Medicine, Institute of Psychiatry, Universita del Piemonte Orientale "Amedeo Avogadro", Novara, Italy; Department of Public Health, University of Turin, Turin, Italy; Department of Translational Medicine, Institute of Psychiatry, Universita del Piemonte Orientale "Amedeo Avogadro", Novara, Italy; Department of Translational Medicine, Institute of Psychiatry, Universita del Piemonte Orientale "Amedeo Avogadro", Novara, Italy; Department of Translational Medicine, Institute of Psychiatry, Universita del Piemonte Orientale "Amedeo Avogadro", Novara, Italy; Department of Public Health, University of Turin, Turin, Italy; Department of Public Health, University of Turin, Turin, Italy; Department of Translational Medicine, Institute of Psychiatry, Universita del Piemonte Orientale "Amedeo Avogadro", Novara, Italy; Department of Translational Medicine, Institute of Psychiatry, Universita del Piemonte Orientale "Amedeo Avogadro", Novara, Italy

Language: English

Abstract: Objectives: We assessed sex differences in a sample of first-admission psychiatric inpatients with and without comorbid substance use disorder (SUD) to identify possible risk factors and targets for sex-tailored treatment interventions. Methods: A retrospective study of first admissions to the University Psychiatry Ward, "Maggiore della Carita" Hospital, Novara, Italy, between 2003 and 2012 was accomplished. The clinical charts of patients with (N = 362) and without comorbid SUD (N = 1111) were reviewed. Results: Differences in employment, educational, and marital statuses were found between male and female psychiatric patients with and without comorbid SUD. Having a degree was a protective factor for males, whereas it was a risk factor for females. Being divorced and having family problems were both risk factors for comorbidity in females. Regarding the diagnosis, results overlapped in males and females, and both affective and other disorders were risk factors for a comorbid SUD. Conclusions: A significant difference between male and female psychiatric patients with a comorbid SUD was the males' overall poorer psychosocial functioning. Marital status and family problems were risk factors for comorbid SUD in females. Both males and females showed various pathways of access to and choices of substances and, eventually, experienced different impacts on their lives. Hospitalization might help to set up a targeted intervention for patients with comorbidity, while accounting for sex differences. With respect to males, a treatment approach focused on the substance alone might help improve their functioning; females might have a greater benefit from a treatment approach focused on distress, family problems, and relational issues. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Dual Diagnosis](#)
[*Human Sex Differences](#)
[*Mental Disorders](#)
[*Psychiatric Hospitalization](#)
[Comorbidity](#)
[Epidemiology](#)
[Intervention](#)
[Risk Factors](#)

Source: PsycINFO

86. Factors affecting noncompliance with buprenorphine maintenance treatment.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(345-350), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Fareed, Ayman; Eilender, Pamela; Ketchen, Bethany; Buchanan-Cummings, Ann Marie; Scheinberg, Kelly; Crampton, Kelli; Nash, Abigail; Shongo-Hiango, Hilaire; Drexler, Karen

Correspondence Address: Fareed, Ayman: Atlanta VA Medical Center, 116A, 1670 Clairmont Rd., Decatur, GA, US, 30033, ayman.fareed@va.gov

Institution: Department of Psychiatry, Emory University School of Medicine, Atlanta, GA, US; Department of Psychiatry, Emory University School of Medicine, Atlanta, GA, US; Atlanta VAMedical Center, Decatur, GA, US; Atlanta VA Medical Center, Decatur, GA, US; Department of Psychiatry and Behavioral Sciences, Emory University School of Medicine, Atlanta, GA, US; Atlanta VA Medical Center, Decatur, GA, US; Department of Psychiatry and Behavioral Sciences, Emory University School of Medicine, Atlanta, GA, US; Atlanta VA Medical Center, Decatur, GA, US; Department of Psychiatry, Emory University School of Medicine, Atlanta, GA, US

Language: English

Abstract: Background: The current study aimed to identify risk factors for treatment noncompliance in a sample of veterans receiving buprenorphine/ naloxone for an opioid use disorder.

Methods: Records from all patients who are currently or had previously been maintained on buprenorphine in the buprenorphine maintenance treatment program at the Atlanta VA Medical Center during the years 2006 to 2013 were evaluated. Of the 209 patients treated in the clinic between 2006 and 2013, 140 were excluded from the study because they did not have a call-back done at the time of data collection. Thus, 69 patient charts were selected for review. Results: The multiple linear regression analysis of the predictable variables for noncompliance with the buprenorphine pill count showed that positive urine drug screen (UDS) for marijuana, benzodiazepines, and being a smoker ($F = 3.08$; $P = 0.03$) are significantly associated with noncompliance with buprenorphine pill count. Also, the multiple linear regression analysis of the predictable variables for noncompliance with the buprenorphine pill count showed that the psychiatric comorbidity independently ($F = 4.88$; $P = 0.03$) is significantly associated with noncompliance with buprenorphine pill count. Conclusions: Patients found to be noncompliant were more likely to suffer from comorbid psychiatric illness. Patients who tested positive for benzodiazepines or cannabis were more likely to be noncompliant with treatment. Although the rate of noncompliance (inaccurate pill count) was high, patients were still found to be taking their prescribed buprenorphine as evidenced by positive UDS for buprenorphine/norbuprenorphine. In addition, our sample had a high rate of negative UDS screens for opioids and cocaine. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Maintenance Therapy](#)
[*Opiates](#)
[*Treatment Compliance](#)
[Drug Usage Screening](#)
[Risk Factors](#)

Source: PsycINFO

87. The feasibility and acceptability of groups for pain management in methadone maintenance treatment.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(338-344), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Barry, Declan T; Savant, Jonathan D; Beitel, Mark; Cutter, Christopher J; Schottenfeld, Richard S; Kerns, Robert D; Moore, Brent A; Oberleitner, Lindsay; Joy, Michelle T; Keneally, Nina; Liang, Christopher; Carroll, Kathleen M

Correspondence Address: Barry, Declan T.: Yale University School of Medicine, CMHC, Room 220, 34 Park St., New Haven, CT, US, 06519, declan.barry@yale.edu

Institution: Yale University School of Medicine, New Haven, CT, US; APT Foundation Pain Treatment Service, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US; APT Foundation Pain Treatment Service, New Haven, CT, US; APT Foundation Pain Treatment Service, New Haven, CT, US; Yale University School of Medicine, New Haven, CT, US

Language: English

Abstract: Objectives: Effective and safe pain management interventions in methadone maintenance treatment are needed. Methods: We examined the feasibility (ie, single-session attendance) and acceptability (ie, patient satisfaction and booster session attendance) of cognitive-behavioral therapy-informed groups for pain management-Coping With Pain, Relaxation Training, Group Singing, and Mindful Walking. Pre- and postsession measures were collected. Results: A total of 349 (out of a census of approximately 800)

methadone-maintained patients attended at least 1 of the groups. Group satisfaction was high. Booster session attendance was numerically lower in Mindful Walking (14%) than in the other groups (at least 40%). Repeat attendance at Coping With Pain was associated with reduced characteristic pain intensity and depression, whereas repeat attendance at Relaxation Training was associated with decreased anxiety. Conclusions: Coping With Pain, Relaxation Training, and Group Singing are transportable, affordable, adaptable, and tolerated well by patients with pain and show promise as components of a multimodal pain management approach in methadone maintenance treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: Annual scientific meeting of the college on problems of drug dependence. 75th. Jun, 2013. San Diego. CA, US. This work was presented in part at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cognitive Behavior Therapy](#)
[*Drug Abuse](#)
[*Group Psychotherapy](#)
[*Methadone Maintenance](#)
[*Pain Management](#)
[Opiates](#)

Source: PsycINFO

88. Benzodiazepines and workplace safety: An examination of postaccident urine drug tests.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(333-337), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Price, James W

Correspondence Address: Price, James W.: St Mary's Medical Center, 2330 Lynch Rd., Evansville, IN, US, 47711, james.price@stmarys.org

Institution: St Mary's Medical Center, Evansville, IN, US

Language: English

Abstract: Background: Benzodiazepines were introduced for clinical use since the 1960s and rapidly became the sedative-hypnotic of choice. The purpose of this study was to determine whether benzodiazepine use as measured by drug tests is higher in postaccident drug tests than in random tests. Methods: This is a case-control study comparing the proportion of benzodiazepine laboratory positive urine specimens for random versus postaccident samples. Any sample that tested positive for 1 or more substances other than benzodiazepines was eliminated from the study to correct for the confounding effect of other potentially impairing substances. The group prevalence of benzodiazepine positive samples was compared via the odds ratio with 95% confidence intervals and the P-values. Results: The study began with 4756 urine samples with 2161 postaccident specimens and 2595 random specimens. A total of 243 of the samples were confirmed positive for drugs other than benzodiazepines. The study was left with 2016 postaccident and 2497 random samples. In the controlled postaccident group, there were 57 positive screens and 17 (29.8%) were confirmed as positive for either a benzodiazepine or benzodiazepine metabolites. In the controlled random group, there were 48 positive screens and 10 (20.8%) were confirmed as positive for either a benzodiazepine or benzodiazepine metabolites. The OR comparing the total confirmed laboratory positive benzodiazepine specimens after controlling for other substances was 2.1150 (0.9663-4.6292) with a P-value of 0.0609. Conclusions: The results for comparing the total confirmed laboratory positive benzodiazepine tests controlled for other substances, although suggestive of an association, did not achieve statistical significance. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Benzodiazepines](#)
[*Drug Usage Screening](#)
[*Occupational Safety](#)
[*Prescription Drugs](#)
[*Side Effects \(Drug\)](#)
[Drug Abuse](#)
[Drug Abuse Liability](#)

Source: PsycINFO

89. Buprenorphine diversion and misuse in outpatient practice.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(327-332), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Lofwall, Michelle R; Martin, Judith; Tierney, Matt; Fatseas, Melina; Auriacombe, Marc; Lintzeris, Nicholas

Correspondence Address: Lofwall, Michelle R.: Departments of Behavioral Science and Psychiatry, Center on Drug and Alcohol Research, University of Kentucky College of Medicine, 515 Oldham Court, Lexington, KY, US, 40502, michelle.lofwall@uky.edu

Institution: Department of Behavioral Science, Center on Drug and Alcohol Research, University of Kentucky College of Medicine, Lexington, KY, US; Department of Public Health, City and County of San Francisco, San Francisco, CA, US; Office-Based Buprenorphine Induction Clinic, Division of Substance Abuse and Addiction Medicine, Department of Psychiatry, San Francisco General Hospital, San Francisco, CA, US; Universite de Bordeaux (Segalen), CNRS USR 3413, Bordeaux, France; Universite de Bordeaux (Segalen), CNRS USR 3413, Bordeaux, France; Drug & Alcohol Services, South East Sydney Local Health District, Caringbah, NSW, Australia

Language: English

Abstract: This case is an amalgamation of several real patients in office-based treatment for prescription opioid dependence synthesized into a single theoretical case. The case illustrates the various ways in which medication diversion and misuse may be encountered in clinical practice and therapeutic responses designed to maximize positive treatment outcomes. It is followed by discussions from several expert addiction medicine providers from 3 different countries, giving their perspectives on the salient aspects of this case. This case conference should be of particular interest to clinicians working with opioid-dependent patients in an outpatient setting. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Addiction](#)
[*Drug Rehabilitation](#)
[*Opiates](#)
[*Outpatient Treatment](#)
[*Treatment Compliance](#)
[Drug Therapy](#)
[Drug Withdrawal](#)
[Treatment Outcomes](#)

Source: PsycINFO

90. A review of buprenorphine diversion and misuse: The current evidence base and experiences from around the world.

Citation: Journal of Addiction Medicine, September 2014, vol./is. 8/5(315-326), 1932-0620;1935-3227 (Sep-Oct 2014)

Author(s): Lofwall, Michelle R; Walsh, Sharon L

Correspondence Address: Lofwall, Michelle R.: Department of Behavioral Science, Center on Drug and Alcohol Research, University of Kentucky College of Medicine, 515 Oldham Ct, Lexington, KY, US, 40502, michelle.lofwall@uky.edu

Institution: Center on Drug and Alcohol Research, University of Kentucky, Lexington, KY, US; Center on Drug and Alcohol Research, University of Kentucky, Lexington, KY, US

Language: English

Abstract: Outpatient opioid addiction treatment with sublingual buprenorphine pharmacotherapy has rapidly expanded in the United States and abroad, and, with this increase in medication availability, there have been increasing concerns about its diversion, misuse, and related harms. This narrative review defines the behaviors of diversion and misuse, examines how the pharmacology of buprenorphine alone and in combination with naloxone influence its abuse liability, and describes the epidemiological data on buprenorphine diversion and intravenous misuse, risk factors for its intravenous misuse, and the unintended consequences of misuse and diversion. Physician practices to prevent, screen for, and therapeutically respond to these behaviors, which are a form of medication nonadherence, are discussed, and gaps in knowledge are identified. Outpatient opioid addiction treatment with sublingual buprenorphine pharmacotherapy experiences from other countries that have varied health care systems, public policies, and access to addiction treatment are shared to make clear that diversion and misuse occur across the world in various contexts, for many different reasons, and are not limited to buprenorphine. Comparisons are made with other opioids with known abuse liability and medications with no known abuse. The objective was to facilitate understanding of diversion and misuse so that all factors influencing their expression (patient and provider characteristics and public policy) can be appreciated within a framework that also recognizes the benefits of addiction treatment. With this comprehensive perspective, further careful work can help determine how to minimize these behaviors without eroding the current benefits realized through improved addiction treatment access and expansion. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Addiction](#)
[*Drug Rehabilitation](#)
[*Opiates](#)
[*Outpatient Treatment](#)
[*Pharmacology](#)
[Drug Abuse](#)
[Epidemiology](#)
[Risk Factors](#)

Source: PsycINFO

91. When is a drug not a drug? Troubling silences and unsettling painkillers in the National Football League.

Citation: Sociology of Sport Journal, September 2014, vol./is. 31/3(249-266), 0741-1235;1543-2785 (Sep 2014)

Author(s): King, Samantha; Carey, R. Scott; Jinnah, Naila; Millington, Rob; Phillipson, Andrea; Prouse, Carolyn; Ventresca, Matt

Correspondence Address: Prouse, Carolyn, carolyn.prouse@geog.ubc.ca

Institution: School of Kinesiology and Health Studies, Queen's University, Kingston, ON, Canada; School of Kinesiology and Health Studies, Queen's University, Kingston, ON, Canada; School of Kinesiology and Health Studies, Queen's University, Kingston, ON, Canada; School of Kinesiology and Health Studies, Queen's University, Kingston, ON, Canada; School of Kinesiology and Health Studies, Queen's University, Kingston, ON, Canada;

School of Kinesiology and Health Studies, Queen's University, Kingston, ON, Canada;
School of Kinesiology and Health Studies, Queen's University, Kingston, ON, Canada

Language: English

Abstract: This paper uses a genealogical approach to explore the conjuncture at which the longstanding but partial and uneasy silence surrounding painkiller use in the National Football League seems increasingly under threat. We historicize and problematize apparently self-evident narratives about painkiller use in contemporary football by interrogating the gendered, racialized and labor-related discourses surrounding Brett Favre's 1996 admission of a dependency on Vicodin, as well as the latest rash of confessions of misuse by now retired athletes. We argue that these coconstructed and coconstructing moments of noise and silence are part of the same discursive system. This system serves to structure the emerging preoccupation with painkillers in the NFL, with Favre's admission still working to placate anxieties surrounding the broader drug problems endemic to the league, and failing to disrupt our implicit knowingness about painkiller use, thus reinforcing ongoing cultures of silence and toughness in professional football. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Human Kinetics, Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Addiction](#)
[*Football](#)
[Anxiety](#)
[Business Organizations](#)
[Silence](#)

Source: PsycINFO

92. An examination of criminogenic needs, mental health concerns, and recidivism in a sample of violent young offenders: Implications for risk, need, and responsivity.

Citation: The International Journal of Forensic Mental Health, October 2014, vol./is. 13/4(295-310), 1499-9013;1932-9903 (Oct 2014)

Author(s): Guebert, Andrea F; Olver, Mark E

Correspondence Address: Olver, Mark E.: Department of Psychology, University of Saskatchewan, Saskatoon, SK, Canada, mark.olver@usask.ca

Institution: Department of Psychology, University of Saskatchewan, Saskatoon, SK, Canada;
Department of Psychology, University of Saskatchewan, Saskatoon, SK, Canada

Language: English

Abstract: Young offender populations typically display high rates of substance use pathology and mental health concerns, however, little is known regarding how these factors relate to dynamic risk factors for reoffending (criminogenic needs) among young offenders. The present study investigated a Canadian sample of 186 youth charged with serious/violent offenses on measures of psychopathology, substance abuse, risk, and recidivism. Significant relationships were found between measures of substance abuse with most indices of the Youth Level of Service/Case Management Inventory (YLS/CMI), a validated risk assessment tool designed to assess criminogenic risk and need. Furthermore, measures of substance abuse predicted general, violent, and nonviolent recidivism for both youth and adult outcomes to varying degrees. Youth with disruptive behavior disorders, comorbid substance use concerns with another disorder (dual diagnosis), or with two or more disorders evidenced more serious criminogenic need profiles, whereas mood, anxiety, and cognitive disorders were unrelated to criminogenic risk. With the exception of conduct disorder and substance use pathology, mental health concerns tended not to be related to recidivism. The implications of these findings in terms of assessing risk and providing treatment services for young offenders is discussed in relation to the risk-need responsivity (RNR) model of effective correctional intervention. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: International Association of Forensic Mental Health Services
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Dual Diagnosis](#)
[*Juvenile Delinquency](#)
[*Mental Health](#)
[*Recidivism](#)
Source: PsycINFO

93. State prisoner misconduct: Contribution of dual psychiatric and substance use disorders.

Citation: The International Journal of Forensic Mental Health, October 2014, vol./is. 13/4(279-294), 1499-9013;1932-9903 (Oct 2014)
Author(s): Wood, Steven R
Correspondence Address: Wood, Steven R.: CSU Stanislaus, One University Circle, Turlock, CA, US, 95382, swood1@csustan.edu
Institution: CSU Stanislaus, Turlock, CA, US
Language: English
Abstract: Using self-report data from American state prisoners (N = 14,499; 79.8% male) and negative binomial regression, this study found prisoners with preadmission dual serious mental and substance use disorders reported greater diversities and numbers of disciplinary infractions in general compared to inmates without dual disorders. Findings were mixed for diversity and number of assaultive infractions. Variety and numbers of charges for infractions in general and assault were strongly associated with previous and current incarceration experiences with assault victimization. The article concludes with suggestions for corrections policies such as screening for dual disorders, PTSD, and assault victimization, and future research. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: International Association of Forensic Mental Health Services
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Dual Diagnosis](#)
[*Mental Disorders](#)
[*Prisoners](#)
[Behavior Problems](#)
[Self Report](#)
Source: PsycINFO

94. Acute risk of suicide and suicide attempts associated with recent diagnosis of mental disorders: A population-based, propensity score-matched analysis.

Citation: The Canadian Journal of Psychiatry / La Revue canadienne de psychiatrie, October 2014, vol./is. 59/10(531-538), 0706-7437;1497-0015 (Oct 2014)
Author(s): Randall, Jason R; Walld, Randy; Finlayson, Greg; Sareen, Jitender; Martens, Patricia J; Bolton, James M
Correspondence Address: Randall, Jason R.: Faculty of Medicine, University of Manitoba, 408-727 McDermot Avenue, Bannatyne Campus, Winnipeg, MB, Canada, R3E 3P5, jason_randall@cpe.umanitoba.ca
Institution: Department of Community Health Sciences, University of Manitoba, Winnipeg, MB, Canada; Manitoba Centre for Health Policy, Winnipeg, MB, Canada; Manitoba Centre for Health Policy, Winnipeg, MB, Canada; Department of Psychiatry, University of Manitoba, Winnipeg, MB, Canada; Manitoba Centre for Health Policy, Winnipeg, MB, Canada; Department of Psychiatry, University of Manitoba, Winnipeg, MB, Canada

- Language:** English
- Abstract:** Objective: To determine the degree of risk during the first year after diagnosis with a mental illness. Methods: We used propensity scoring to create a matched sample for all identified suicide attempts and suicide deaths in the province of Manitoba from 1996 to 2009. This study identified 2100 suicide deaths and 8641 attempted suicides. Three control subjects were identified for every case and matched on age, sex, income decile, region of residence, and marital status. Five categories of physician-diagnosed mental disorders were tested: schizophrenia, anxiety, depression, dementia, and substance abuse. Logistic regression was used to determine the risk for suicide attempts and suicide deaths overall, and within 3 time periods since initial diagnosis: 1 to 90 days, 91 to 364 days, and 365 or more days. Results: All disorders, except dementia, were independently related to death. All disorders were related to suicide attempts. The risk of dying by suicide was particularly high within the first 90 days after initial diagnosis for many disorders, including depression (adjusted odds ratio [AOR] 7.33; 95% CI 4.76 to 11.3), substance use disorders (AOR 4.07; 95% CI 2.43 to 6.82), and schizophrenia (AOR 20.91; 95% CI 2.55 to 172). Depression and anxiety disorders had elevated risk in the first year for suicide attempts. Conclusions: These data suggest that several mental disorders independently increase the risk of suicide attempts and death by suicide after controlling for all mental disorders and demographic risk factors. Clinicians should be aware of the heightened risk of suicide and suicidal behaviour within the first 3 months after initial diagnosis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Conference Information:** Canadian Psychiatric Association Meeting. Sep, 2013. Ottawa. ON, Canada. This paper was presented as an Oral Presentation at the aforementioned conference.
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Attempted Suicide](#)
[*Diagnosis](#)
[*Mental Disorders](#)
[Dementia](#)
[Drug Abuse](#)
[Risk Factors](#)
[Schizophrenia](#)
[Morbidity](#)
[Case Conceptualization](#)
- Source:** PsycINFO
- Full Text:** Available from *ProQuest* in [Canadian Journal of Psychiatry](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

95. Service use and unmet needs in youth suicide: A study of trajectories.

- Citation:** The Canadian Journal of Psychiatry / La Revue canadienne de psychiatrie, October 2014, vol./is. 59/10(523-530), 0706-7437;1497-0015 (Oct 2014)
- Author(s):** Renaud, Johanne; Seguin, Monique; Lesage, Alain D; Marquette, Claude; Choo, Bettina; Turecki, Gustavo
- Correspondence Address:** Renaud, Johanne: Douglas Mental Health University Institute, 6875 Lasalle, Montreal, PQ, Canada, H4H 1R3, johanne.renaud@douglas.mcgill.ca
- Institution:** Department of Psychiatry, McGill University, Montreal, PQ, Canada; Universite du Quebec en Outaouais, Gatineau, PQ, Canada; Department of Psychiatry, Institut Universitaire en Sante Mentale de Montreal, Universite de Montreal, Montreal, PQ, Canada; Department of Psychiatry, Centre Hospitalier Universitaire Sainte-Justine, Universite de Montreal, Montreal, PQ, Canada; Department of Psychiatry, Douglas Mental Health University Institute, McGill University, Montreal, PQ, Canada; Department of Psychiatry, McGill University, Montreal, PQ, Canada
- Language:** English

Abstract: Objective: While 90% of suicide victims have suffered from mental health disorders, less than one-half are in contact with a mental health professional in the year preceding their death. Service use in the last year of life of young suicide victims and control subjects was studied in Quebec. We wanted to determine what kinds of health care services were needed and if they were actually received by suicide victims. Method: We recruited 67 consecutive suicide victims and 56 matched living control subjects (aged 25 years and younger). We evaluated subjects' psychopathological profile and determined which services would have been indicated by conducting a needs assessment. We then compared this with what services were actually received. Results: Suicide victims were more likely than living control subjects to have a psychiatric diagnosis. They were most in need of services to address substance use disorder, depression, interpersonal distress, and suicide-related problems. There were significant deficits in the domains of coordination and continuity of care, mental health promotion and training, and governance. Conclusions: Our results show that we need to urgently take action to address these identified deficits to prevent further loss of life in our young people. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Attempted Suicide](#)
[*Prevention](#)
[*Public Health](#)
[Drug Abuse](#)
[Mental Health Services](#)
[Predelinquent Youth](#)

Source: PsycINFO

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

96. Industry and occupation variations in nonmedical prescription pain reliever use.

Citation: Journal of Workplace Behavioral Health, October 2014, vol./is. 29/4(299-316), 1555-5240;1555-5259 (Oct 2014)

Author(s): Cluff, Laurie; Tueller, Stephen; Batts, Kathy; Miller, Ted; Galvin, Deborah

Correspondence Address: Cluff, Laurie: RTI International, 3040 Cornwallis Road, Research Triangle Park, NC, US, 27709, lcluff@rti.org

Institution: RTI International, Research Triangle Park, NC, US; RTI International, Research Triangle Park, NC, US; RTI International, Research Triangle Park, NC, US; Pacific Institute for Research and Evaluation, Beltsville, MD, US; Substance Abuse and Mental Health Services Administration, Rockville, MD, US

Language: English

Abstract: Nonmedical use of prescription pain relievers can be a serious problem for employers. Despite growing attention to prescription drug abuse, little is known about which industries or occupations are at the highest risk for misuse. This study used data from the National Survey on Drug Use and Health to compare each industry to every other industry to identify significant differences in rates of past-year prescription drug misuse. Findings suggest that for industries with the highest prevalence rates, prescription misuse cannot be explained by basic demographics and likely involves elements inherent to the work context and requirements. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Business Organizations](#)
[*Occupations](#)
[*Pain](#)
[*Prescription Drugs](#)

[Drug Abuse](#)
[Epidemiology](#)

Source: PsycINFO

97. Review of Family troubles? Exploring changes and challenges in the family lives of children and young people.

Citation: Child Abuse Review, September 2014, vol./is. 23/5(382), 0952-9136;1099-0852 (Sep-Oct 2014)

Author(s): Smith, Jayne

Institution: NHS Fife, Fife, United Kingdom

Language: English

Abstract: Reviews the book, Family Troubles? Exploring Changes and Challenges in the Family Lives of Children and Young People edited by Jane Ribbens McCarthy, Carol-Ann Hooper, and Val Gillies (2013). This book brings together a collection of research evidence from a wide range of contributors who have worked with families across the world. It explores what it is like to work with families who have experienced family troubles and addresses problems relating to domestic violence, parenting issues, parental substance misuse, fathers, teenagers and children with disabilities. It offers evidence from research in relation to domestic violence and parental substance misuse and highlights how each member of the family may have differing experiences within a family. Whether you currently work within social work, health, education or another agency, there is something for everyone within this one book. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: John Wiley & Sons, Ltd.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Domestic Violence](#)
[*Family Relations](#)
[*Parent Child Relations](#)
[Disabilities](#)
[Drug Abuse](#)

Source: PsycINFO

Full Text: Available from *Wiley* in [Child Abuse Review](#)

98. Reductions in HIV prevalence rates among substance-using men who have sex with men in Los Angeles county, 2008-2011.

Citation: AIDS Education and Prevention, October 2014, vol./is. 26/5(459-470), 0899-9546 (Oct 2014)

Author(s): Reback, Cathy J; Fletcher, Jesse B

Correspondence Address: Reback, Cathy J.: Friends Research Institute, 1419 N. La Brea Ave., Los Angeles, CA, US, 90028, reback@friendsresearch.org

Institution: Friends Research Institute, Inc., Los Angeles, CA, US; Friends Research Institute, Inc., Los Angeles, CA, US

Language: English

Abstract: An outreach program performed street encounters with 5,599 unique substance-using MSM from January 2008 through December 2011. HIV prevalence reduced from 20.2% in the first half of 2008 to 8.1% in the second half of 2011. Older, gay-identified, non-Hispanic/Latino participants were each more likely to report a HIV-positive serostatus. When controlling for these cofactors, robust log-Poisson analysis revealed that each additional day of methamphetamine (RRR = 1.03; 95% CI [1.02, 1.03]) and/or marijuana (RRR = 1.01; 95% CI [1.01, 1.02]) use in the previous 30 days, injection drug use at any point in their lifetime (RRR = 2.01; 95% CI [1.70, 2.37]), and/or unprotected anal intercourse with another male in the previous 30 days (RRR = 1.48; 95% CI [1.29, 1.71]) were associated with HIV-positive status. When controlling for all these cofactors,

the probability of reporting a HIV-positive status reduced an estimated 9% (95% CI [6%, 12%]) every six months throughout the reporting period. Self-reported HIV prevalence decreased among this sample of substance-using MSM in LAC from 2008 to 2011. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Guilford Press; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*HIV](#)
[*Outreach Programs](#)
["*Latinos/Latinas"](#)

Source: PsycINFO

Full Text: Available from *EBSCOhost* in [AIDS Education & Prevention](#)
Available from *EBSCOhost* in [AIDS Education & Prevention](#)

99. The effect of a local change team intervention on staff attitudes towards HIV service delivery in correctional settings: A randomized trial.

Citation: AIDS Education and Prevention, October 2014, vol./is. 26/5(411-428), 0899-9546 (Oct 2014)

Author(s): Visher, Christy A; Hiller, Matthew; Belenko, Steven; Pankow, Jennifer; Dembo, Richard; Frisman, Linda K; Pearson, Frank S; Swan, Holly; Wiley, Tisha R. A

Correspondence Address: Visher, Christy A.: Center for Drug & Health Studies, University of Delaware, 257 East Main St., Suite 110, Newark, DE, US, 19716, visher@udel.edu

Institution: University of Delaware, Newark, DE, US; Temple University, Philadelphia, PA, US; Temple University, Philadelphia, PA, US; Texas Christian University, Ft Worth, TX, US; University of South Florida, Tampa, FL, US; University of Connecticut, Storrs, CT, US; National Development and Research Institutes, Inc., NY, US; Center for Healthcare Organization and Implementation Research, Edith Nourse Rogers Memorial VA Medical Center, DC, US; National Institute on Drug Abuse, Rockville, MD, US

Language: English

Abstract: The National Criminal Justice Drug Abuse Treatment Studies research program conducted cluster randomized trials to test an organizational process improvement strategy for implementing evidence-based improvements in HIV services for preventing, detecting, and/or treating HIV for individuals under correctional supervision. Nine research centers conducted cluster randomized trials in which one correctional facility used a modified Network for Improvement of Addiction Treatment (NIATx) change team approach to implementing improved HIV services and the other facility used their own approach to implement the improved HIV services. This paper examines whether the intervention increased the perceived value of HIV services among staff of correctional and community HIV organizations. Baseline and follow-up measures of the perceived acceptability, feasibility, and organizational support for implementing HIV service improvements were collected from correctional, medical, and community HIV treatment staff. Results indicated that the perceived acceptability and feasibility of implementing HIV services improved among staff in the facilities using the modified NIATx change team approach as compared to staff in the comparison facilities. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Guilford Press; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*AIDS](#)
[*Correctional Institutions](#)
[*Criminal Justice](#)
[*Drug Abuse](#)
[*Intervention](#)
[Facilities](#)

Source: PsycINFO
Full Text: Available from *EBSCOhost* in *AIDS Education & Prevention*
 Available from *EBSCOhost* in *AIDS Education & Prevention*

100. Follow-up encounters within 30 days of a substance abuse-related inpatient discharge.

Citation: Psychiatric Services, September 2014, vol./is. 65/9(1180), 1075-2730 (Sep 1, 2014)
Author(s): Smith, Mark W; Mark, Tami L
Correspondence Address: Smith, Mark W., mark.w.smith@truvenhealth.com
Institution: Truven Health Analytics, Bethesda, MD, US; Truven Health Analytics, Bethesda, MD, US
Language: English
Abstract: Presents a study aims to measure the annual percentage of individuals aged 13-64 who were covered under employer health plans and who received outpatient treatment for a substance use disorder within 30 days of a related inpatient stay. All data (2001-2012) were from the Truven Health Market Scan Commercial Claims and Encounters Database, which includes claims of employed individuals and dependents from all U.S. Census divisions. The denominator was number of claims that met these criteria: discharge from an inpatient acute or residential facility, age 13-64, primary ICD-9-CM discharge diagnosis of drug or alcohol abuse or dependence, discharge date between January 1 and December 1 (to allow for 30 days of December follow-up), discharge status was not death or transfer to another facility, and continued plan enrollment for 30 days after discharge. The dissimilarity of the two follow-up measures makes it difficult to compare outcomes for persons with substance use disorders and those with other mental disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Hospital Discharge](#)
[*Outpatient Treatment](#)
[*Treatment Duration](#)
[Mental Disorders](#)
Source: PsycINFO

101. Patients with paranoid symptoms: Considerations for the optometrist.

Citation: Optometry & Visual Performance, May 2013, vol./is. 1/3(100-104), 2325-3479;2325-3487 (May 2013)
Author(s): Bampton, Mark; Neiberg, Maryke N
Correspondence Address: Neiberg, Maryke N.: Western University of Health Sciences, College of Optometry, 309 E. Second Street, Pomona, CA, US, 91766, mneiberg@westernu.edu
Institution: Western University of Health Sciences, College of Optometry, Pomona, CA, US; Western University of Health Sciences, College of Optometry, Pomona, CA, US
Language: English
Abstract: Pathological paranoia involves a pervasive style of thinking and relating to others that is unyielding to reason and is independent of transient influences. Paranoia associated with drug abuse, neurodegenerative disease, and mental health issues will be discussed and care strategies explored. Optometrists will undoubtedly encounter patients with varying degrees and forms of paranoid symptoms. In order to provide the best possible vision care for these patients, it is essential that the optometrist be well prepared for the tension and resistance that is likely to occur during the exam. This paper will focus on patients who exhibit problematic paranoid symptoms and the relevant considerations for optometry. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Country of Publication: HOLDER: Optometric Extension Program Foundation; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Neurodegenerative Diseases](#)
[*Optometrists](#)
[*Paranoia](#)
[*Traumatic Brain Injury](#)
[Drug Abuse](#)
Source: PsycINFO

102. Minor mental aberrations-Concluded.

Citation: The individual delinquent: A text-book, or, diagnosis and prognosis for all concerned in understanding offenders., 1915(651-693) (1915)
Author(s): Healy, William
Institution: Psychopathic Institute, Juvenile Court, Chicago, IL, US
Language: English
Abstract: (from the chapter) This chapter concludes the discussion of minor mental aberrations in criminals. Topics covered include adolescent mental aberrations, alcoholic psychoses, and psychoses from drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Book; Authored Book
Subject Headings: [*Criminal Behavior](#)
[Adolescent Psychopathology](#)
[Alcoholic Psychosis](#)
[Criminals](#)
[Drug Abuse](#)
[Mental Disorders](#)
Source: PsycINFO

103. Environmental factors.

Citation: The individual delinquent: A text-book, or, diagnosis and prognosis for all concerned in understanding offenders., 1915(282-296) (1915)
Author(s): Healy, William
Institution: Psychopathic Institute, Juvenile Court, Chicago, IL, US
Language: English
Abstract: (create) This chapter discusses the influence of environmental factors on criminality and criminal behavior. Topics covered include treatment of these factors, alcoholic parents, immoral home environment, immoral or criminal family members, parental harshness, incompetent parents, separated parents, poverty, homelessness, parental neglect, bad companions, and school irritations. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Book; Authored Book
Subject Headings: [*Criminal Behavior](#)
[*Criminals](#)
[*Environmental Effects](#)
[Alcoholism](#)
[Child Neglect](#)
[Family Members](#)
[Home Environment](#)
[Marital Separation](#)
[Parenting Style](#)
[School Environment](#)
[Authoritarian Parenting](#)
[Permissive Parenting](#)

Source: PsycINFO

104. Factors in developmental conditions.

Citation: The individual delinquent: A text-book, or, diagnosis and prognosis for all concerned in understanding offenders., 1915(201-213) (1915)

Author(s): Healy, William

Institution: Psychopathic Institute, Juvenile Court, Chicago, IL, US

Language: English

Abstract: (create) This chapter discusses how developmental conditions influence the development of mental disorders and criminal behavior. Topics covered include physical conditions during pregnancy; abuse during pregnancy; insanity and epilepsy in the pregnant mother; alcoholism; morphinism; congenital syphilis; parental age; attempted abortion; twins; mother working during pregnancy; maternal impressions; premature birth; difficult labor; and the nature and causes of offenses in old age. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Authored Book

Subject Headings: [*Criminal Behavior](#)
[*Mental Disorders](#)
[*Neonatal Development](#)
[*Pregnancy](#)
[Alcoholism](#)
[Congenital Disorders](#)
[Epilepsy](#)
[Expectant Mothers](#)
[Induced Abortion](#)
[Labor \(Childbirth\)](#)
[Premature Birth](#)
[Syphilis](#)
[Twins](#)
[Chronological Age](#)

Source: PsycINFO

105. Using the Substance Abuse and Mental Health Services Administration (SAMHSA) evidence-based practice kits in social work education.

Citation: Research on Social Work Practice, November 2014, vol./is. 24/6(705-714), 1049-7315;1552-7581 (Nov 2014)

Author(s): Myers, Laura L; Wodarski, John S

Correspondence Address: Myers, Laura L.: Florida A&M University, Banneker Building B, Suite 300, Tallahassee, FL, US, 32307, laura.myers@fam.u.edu

Institution: Florida A&M University, Tallahassee, FL, US; University of Tennessee, Knoxville, TN, US

Language: English

Abstract: In today's climate, it is becoming increasingly important to provide social work students with practice knowledge on research-supported social work interventions. CSWE has placed greater emphasis on using research-based knowledge to inform and guide social work practice, and the field has recognized the value of adhering to the evidence-based practice model in all facets of social work practice. It is at this juncture when social work educators are expected, with ever-diminishing resources, to offer training in evidence-based practice to social work students and practitioners that SAMHSA has developed a series of practice kits on a variety of research-supported treatment programs. Structuring portions of social work education around these toolkits would be one way of promoting a more research-supported curriculum content. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Government Policy Making](#)
[*Social Casework](#)
[*Social Work Education](#)
[Drug Abuse](#)
[Mental Health](#)
Source: PsycINFO

106. Opioids for chronic noncancer pain: A position paper of the American Academy of Neurology.

Citation: Neurology, September 2014, vol./is. 83/14(1277-1284), 0028-3878;1526-632X (Sep 30, 2014)
Author(s): Franklin, Gary M
Correspondence Address: Franklin, Gary M., meddir@uw.edu
Institution: Department of Occupational and Environmental Health Sciences, University of Washington, Seattle, WA, US
Language: English
Abstract: The Patient Safety Subcommittee requested a review of the science and policy issues regarding the rapidly emerging public health epidemic of prescription opioid-related morbidity and mortality in the United States. Over 100,000 persons have died, directly or indirectly, from prescribed opioids in the United States since policies changed in the late 1990s. In the highest-risk group (age 35-54 years), these deaths have exceeded mortality from both firearms and motor vehicle accidents. Whereas there is evidence for significant short-term pain relief, there is no substantial evidence for maintenance of pain relief or improved function over long periods of time without incurring serious risk of overdose, dependence, or addiction. The objectives of the article are to review the following: (1) the key initiating causes of the epidemic; (2) the evidence for safety and effectiveness of opioids for chronic pain; (3) federal and state policy responses; and (4) recommendations for neurologists in practice to increase use of best practices/universal precautions most likely to improve effective and safe use of opioids and to reduce the likelihood of severe adverse and overdose events. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Academy of Neurology; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Neurology](#)
[*Opiates](#)
[*Pain](#)
[*Public Health](#)
[*Risk Factors](#)
Source: PsycINFO
Full Text: Available from *Ovid* in [Neurology](#)

107. Social skills and their relationship to drug use among 15-16-year-old students in Estonia: An analysis based on the ESPAD data.

Citation: Nordic Studies on Alcohol and Drugs, September 2014, vol./is. 31/4(401-412), 1458-6126 (Sep 2014)
Author(s): Vorobjov, Sigrid; Saat, Helve; Kull, Merike
Correspondence Address: Vorobjov, Sigrid, sigrid.vorobjov@tai.ee
Institution: Infectious Diseases and Drug Monitoring Department, National Institute for Health Development, Estonia; Institute of Psychology, Tallinn University, Tallinn, Estonia;

Institute of Sport Pedagogy, Faculty of Exercise and Sport Sciences, University of Tartu, Tartu, Estonia

Language:

English

Abstract:

Aim: to investigate the relationship between levels of social skills and drug use among 15-16-year-old students in Estonia. **Methods:** A total of 2,460 Estonian schoolchildren, born in 1995, participated in the ESPAD study in 2011. Individual social skills levels were measured with questions on prosocial and antisocial behaviours assessing how children perform within their social milieu. The relationship between social skills levels and drug use was estimated using chi-squared tests and logistic regression analysis. Odds ratios (OR) were adjusted for gender, parents' education and financial well-being, and 95% confidence intervals (CI) were used to estimate risks of drug use by social skills level. **Results:** Students with lower social skills were at greater risk of starting smoking and smoking daily (50% risk increase). Students with low social skills had a higher risk of lifetime use of cannabis (OR = 1.4; 95%CI 1.1-1.9), sedatives/tranquillisers without a prescription (OR = 2.3; 1.4-3.9), and inhalants (OR = 1.9; 1.2-3.0). The number of students with lower social skills was significantly higher among boys than girls: 35% vs 19%. **Conclusions:** Students' social skill levels were related to their licit and illicit drug use. A low level of social skills can increase adolescents' vulnerability to drug use. As boys' social skills levels appeared much lower and their drug use higher than that of girls, we suggest that gender-related risk prevention programmes of social skills training could be beneficial in preventing drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

[*Drug Usage](#)
[*Social Skills](#)
[Adolescent Development](#)

Source:

PsycINFO

Full Text:

Available from *ProQuest* in [Nordic Studies on Alcohol and Drugs](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

108. Collectivity of drinking behavior among adolescents: An analysis of the Norwegian ESPAD data 1995-2011.**Citation:**

Nordic Studies on Alcohol and Drugs, September 2014, vol./is. 31/4(389-400), 1458-6126 (Sep 2014)

Author(s):

Brunborg, Geir Scott; Bye, Elin K; Rossow, Ingeborg

Correspondence Address:

Brunborg, Geir Scott, gsb@sirus.no

Institution:

Norwegian Institute for Alcohol and Drug Research, Norway; Norwegian Institute for Alcohol and Drug Research, Norway; Norwegian Institute for Alcohol and Drug Research, Norway

Language:

English

Abstract:

Aims: The aim of the current study was to test empirically two predictions from Skog's theory of collectivity of drinking behavior, using time series data from Norwegian adolescents. The two specific predictions were: 1) A change in mean alcohol consumption is positively associated with a change in the proportion of heavy drinkers, and 2) A change in mean alcohol consumption is positively associated with a change at all consumption levels. **Data & Methods:** The present analyses are based on ESPAD data collected from Norwegian adolescents (15-16 years) in 1995, 1999, 2003, 2007 and 2011. The relationship between mean consumption and the proportion of heavy drinkers was analyzed by regressing the proportions of heavy drinkers at each time point on the consumption means at each time point. In order to assess whether adolescents at all consumption levels, from light to heavy drinkers, changed collectively as mean consumption changed, we regressed log-transformed consumption means on the log-transformed percentile values (P25, P50, P75, P90 and P95). The analysis was restricted to adolescents who had consumed alcohol in the last 30 days (total n = 7554). **Results:** The results showed a strong relationship between mean alcohol consumption and

the proportion of heavy drinkers. An increase in mean consumption was also associated with an increase at all consumption levels, from light to heavy drinkers. Conclusion: The results of the current study are in line with the theory of collectivity of drinking behavior. The findings of this study suggest that by reducing the total consumption of alcohol among adolescents, consumption and risk of harm may be reduced in all consumer groups. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Drinking Behavior](#)
[Adolescent Development](#)
[Alcoholism](#)
[Time Series](#)

Source: PsycINFO

Full Text: Available from *ProQuest* in [Nordic Studies on Alcohol and Drugs](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

109. Cannabis use and drug related problems among adolescents in 27 European countries: The utility of the prevention paradox.

Citation: Nordic Studies on Alcohol and Drugs, September 2014, vol./is. 31/4(359-369), 1458-6126 (Sep 2014)

Author(s): Romelsjo, Anders; Danielsson, Anna-Karin; Wennberg, Peter; Hibell, Bjorn

Correspondence Address: Romelsjo, Anders, anders.romelsjo@ki.se

Institution: Karolinska Institutet, Department of Public Health Science, Stockholm, Sweden; Karolinska Institutet, Department of Public Health Science, Stockholm, Sweden; Karolinska Institutet, Department of Public Health Science, Stockholm, Sweden; Swedish Council for Information on Alcohol and Other Drugs, Stockholm, Sweden

Language: English

Abstract: Aims: To study the prevalence of cannabis use and drug-related problems among European adolescents and the utility of the prevention paradox. Methods: Survey data from the European School Survey Project on Alcohol and Other Drugs (ESPAD) in 2007 in the 27 countries with information about drug use and drug-related problems was used. We analysed the proportion of all drug-related problems that occurred in a high risk group and among others who had used cannabis in the previous 12 months. The cut-off for the high risk group was chosen to include 10-15 % of the most frequent cannabis users. Results: The high risk groups accounted for a substantial, but a minority, of drug-related problems among boys as well as girls. A minority of those who had used cannabis reported any drug-related problem. The proportion of adolescents with drug-related problems and the average number of problems increased with frequency of cannabis use. Conclusions: We find support for policy measures of more general character, supported by the prevention paradox. However, this does not exclude a policy supporting frequent drug users if they can be identified. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*At Risk Populations](#)
[*Cannabis](#)
[*Drug Abuse](#)
[Drug Abuse Prevention](#)
[Policy Making](#)

Source: PsycINFO

Full Text: Available from *ProQuest* in [Nordic Studies on Alcohol and Drugs](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

110. New indicators to compare and evaluate harmful drug use among adolescents in 38 European countries.

- Citation:** Nordic Studies on Alcohol and Drugs, September 2014, vol./is. 31/4(343-358), 1458-6126 (Sep 2014)
- Author(s):** Mamone, Alessia; Fabi, Francesco; Colasante, Emanuela; Siciliano, Valeria; Molinaro, Sabrina; Kraus, Ludwig; Rossi, Carla
- Correspondence Address:** Mamone, Alessia, alessia.mammone@uniroma2.it
- Institution:** University of Rome Tor Vergata, Rome, Italy; Illicit Drug Market Institute, Rome, Italy; Institute of Clinical Physiology, National Research Council, Italy; Institute of Clinical Physiology, National Research Council, Italy; Institute of Clinical Physiology, National Research Council, Italy; IFT Institut für Therapieforschung, München, Germany; Centre for Biostatistics and Bioinformatics, University of Rome, Rome, Italy
- Language:** English
- Abstract:** Aims: New trends in drug consumption reveal increasing polydrug use. Epidemiological indicators in the current use are based on the prevalence and the associated potential harm of a single "main" substance. We propose new indicators to evaluate frequency and potential harm of polydrug use. The indicators are used to compare drug use among countries based on survey data on adolescents' substance use in 38 European countries. Methods: The approach is based on analysis of the frequency of use in the various population samples: lifetime use, twelve months use or last thirty days, depending on available data, and on the risk of harm for the substances used. Two indicators are provided: the frequency of use score (FUS) by summing the frequency of use of each substance, and the polydrug use score (PDS) that weight all the substances used by their risk. Results: The indicators FUS and PDS were calculated and the distribution functions were used to characterise substance use across ESPAD countries. The analysis shows important differences in poly-substance use severity among countries presenting similar prevention policies. Conclusions: Systematic analysis of substance use and the related risk are of paramount interest. The proposed indicators are designed to better monitor and understand consequences of polydrug use and to measure the resulting risk at country or population level. The indicators may also be used to assess the effects of policy interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Cross Cultural Differences](#)
[*Drug Abuse](#)
[*Polydrug Abuse](#)
[Adolescent Development Trends](#)
- Source:** PsycINFO
- Full Text:** Available from *ProQuest* in [Nordic Studies on Alcohol and Drugs](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

111. Polydrug use by European adolescents in the context of other problem behaviours.

- Citation:** Nordic Studies on Alcohol and Drugs, September 2014, vol./is. 31/4(323-342), 1458-6126 (Sep 2014)
- Author(s):** Kokkevi, Anna; Kanavou, Eleftheria; Richardson, Clive; Fotiou, Anastasios; Papadopoulou, Sonia; Monshouer, Karin; Matias, Joao; Olszewski, Deborah
- Correspondence Address:** Kokkevi, Anna, akokkevi@med.uoa.gr
- Institution:** University Mental Health Research Institute, Athens, Greece; University Mental Health Research Institute, Athens, Greece; Panteion University of Social and Political Sciences, Athens, Greece; University Mental Health Research Institute, Athens, Greece; University Mental Health Research Institute, University Medical School, Athens, Greece;

Department of Disciplinary Social Science, Utrecht, Netherlands; European Monitoring Centre for Drugs and Drug Addiction, Lisbon, Portugal; European Monitoring Centre for Drugs and Drug Addiction, Lisbon, Portugal

- Language:** English
- Abstract:** Aim: Previous studies of the association between polydrug use and other risk behaviours have generally been limited to specific substances and a small number of behaviours. The aim of this study is to obtain better insight into polydrug use (comprising legal and illegal substances: tobacco, alcohol, tranquillisers/sedatives, cannabis, and other illegal drugs) and its association with co-occurring problem behaviours drawn from various broad domains (sexual, aggressive, delinquent, school achievement, relationships) among European adolescents. Methods: Data were obtained from 101,401 16-year-old students from 35 European countries participating in the 2011 ESPAD survey. Associations between polydrug use and other problem behaviours were examined by multinomial and binary logistic regression analyses. Results: Tranquillisers/sedatives appeared among the commonest combinations in the polydrug use pattern, especially for females. A strong trend was found between levels of involvement with polydrug use and other problem behaviours for both genders. The highest associations with polydrug use were for problems with the police, risky sexual behaviour and skipping school. Gender differences showed higher prevalences among boys than girls of problem behaviours of aggressive, antisocial type, while girls prevailed over boys in relationship problems. Conclusion: An incremental relationship exists between the level of involvement with polydrug use and the co-occurrence of problem behaviours. Preventative interventions should consider the misuse of tranquillisers/sedatives within the context of polydrug use by adolescents and expand their target groups towards multiple problem behaviours. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Behavior Problems](#)
[*Drug Usage](#)
[*Polydrug Abuse](#)
[Adolescent Development](#)
[School Based Intervention](#)
- Source:** PsycINFO
- Full Text:** Available from *ProQuest* in *Nordic Studies on Alcohol and Drugs*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

112. Whence and whither: Strengths and future challenges of ESPAD.

- Citation:** Nordic Studies on Alcohol and Drugs, September 2014, vol./is. 31/4(319-322), 1458-6126 (Sep 2014)
- Author(s):** Kraus, Ludwig; Hibell, Bjorn
- Correspondence Address:** Kraus, Ludwig, Kraus@ift.de
- Institution:** IFT Institut fur Therapieforchung, Munchen, Germany; Swedish Council for Information on Alcohol and Other Drugs (CAN), Stockholm, Sweden
- Language:** English
- Abstract:** This editorial focuses on the European School Survey Project on Alcohol and Other Drugs (ESPAD). The purpose of ESPAD is to monitor substance use behavior in adolescents in as many European countries as possible; i.e. including many states that are not members of the European Union. The distinctive possibilities for within- and between-country comparisons within ESPAD are the common methodology that has been applied since the beginning. With its four-year data collection intervals ESPAD serves politicians and other decision-makers in their efforts to follow substance use trends and to identify preventive measures among young Europeans. However, ESPAD is not only an important source of information for policy makers, but also for the international research community. ESPAD databases are available to non-ESPAD researchers, and with information collected quadrennially on more than 100 00 students from a large majority

of European countries, ESPAD data should continue to be a unique and irreplaceable source for increasing the knowledge about young people's use of different substances. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Abuse Prevention](#)
[*School Based Intervention](#)
[Surveys](#)

Source: PsycINFO

Full Text: Available from *ProQuest* in [Nordic Studies on Alcohol and Drugs](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

113. Stimulant-induced dopamine increases are markedly blunted in active cocaine abusers.

Citation: Molecular Psychiatry, September 2014, vol./is. 19/9(1037-1043), 1359-4184;1476-5578 (Sep 2014)

Author(s): Volkow, N. D.; Tomasi, D.; Wang, G.-J.; Logan, J.; Alexoff, D. L.; Jayne, M.; Fowler, J. S.; Wong, C.; Yin, P.; Du, C

Correspondence Address: Volkow, N. D.: National Institute on Alcohol Abuse and Alcoholism, 6001 Executive Boulevard, Room 5274, Bethesda, MD, US, 20892, nvolkow@nida.nih.gov

Institution: National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US; National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US; Bioscience Department, Brookhaven National Laboratory, Upton, NY, US; Bioscience Department, Brookhaven National Laboratory, Upton, NY, US; Bioscience Department, Brookhaven National Laboratory, Upton, NY, US; National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US; Bioscience Department, Brookhaven National Laboratory, Upton, NY, US; National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US; Department of Biomedical Engineering, Stony Brook University, Stony Brook, NY, US; Department of Biomedical Engineering, Stony Brook University, Stony Brook, NY, US

Language: English

Abstract: Dopamine signaling in nucleus accumbens is essential for cocaine reward. Interestingly, imaging studies have reported blunted dopamine increases in striatum (assessed as reduced binding of [¹¹C]raclopride to D2/D3 receptors) in detoxified cocaine abusers. Here, we evaluate whether the blunted dopamine response reflected the effects of detoxification and the lack of cocaine-cues during stimulant exposure. For this purpose we studied 62 participants (43 non-detoxified cocaine abusers and 19 controls) using positron emission tomography and [¹¹C]raclopride (radioligand sensitive to endogenous dopamine) to measure dopamine increases induced by intravenous methylphenidate and in 24 of the cocaine abusers, we also compared dopamine increases when methylphenidate was administered concomitantly with a cocaine cue-video versus a neutral-video. In controls, methylphenidate increased dopamine in dorsal (effect size 1.4; $P < 0.001$) and ventral striatum (location of accumbens) (effect size 0.89; $P < 0.001$), but in cocaine abusers methylphenidate's effects did not differ from placebo and were similar whether cocaine-cues were present or not. In cocaine abusers despite the markedly attenuated dopaminergic effects, the methylphenidate-induced changes in ventral striatum were associated with intense drug craving. Our findings are consistent with markedly reduced signaling through D2 receptors during intoxication in active cocaine abusers regardless of cues exposure, which might contribute to compulsive drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Dopamine](#)

*Drug Abuse
 *Methylphenidate
 *Receptor Binding
 Nucleus Accumbens

Source: PsycINFO

114. Measuring pain perceptions and medication taking behavior at the end of life: A pilot study.

Citation: American Journal of Hospice & Palliative Medicine, November 2014, vol./is. 31/7(726-729), 1049-9091;1938-2715 (Nov 2014)

Author(s): Hutt, Evelyn; Fink, Regina M; Nelson-Marten, Paula; Jones, Jacqueline; Kutner, Jean S

Correspondence Address: Fink, Regina M.: Department of Professional Resources, University of Colorado Hospital, PO Box 6510-901, Aurora, CO, US, 80045, regina.fink@uchealth.org

Institution: Colorado REAP in Care Coordination Eastern Colorado Health Care System, CO, US; University of Colorado Hospital, Aurora, CO, US; University of Colorado College of Nursing, Anschutz Medical Campus, CO, US; University of Colorado College of Nursing, Anschutz Medical Campus, CO, US; Division of General Internal Medicine, University of Colorado, School of Medicine, Denver, CO, US

Language: English

Abstract: Background: Understanding why some patients with terminal illness are reluctant to take sufficient medication to control pain is critical to effective pain management. Objective: As a first step toward exploring the pain medication-taking behavior of palliative care patients, this pilot study tested a survey regarding pain medication adherence, medication beliefs, and quality of life (QoL). Design: Convenience sample; survey. Setting/Subjects: Six patients receiving inpatient Palliative Care consultations at an academic medical center answered questions about their outpatient pain medication-taking behavior. Measurements: Medication Adherence Report Scale (MARS), Beliefs about Medications Questionnaire (BMQ), Brief Pain Inventory (BPI), closed-response items from a pain medication adherence study in terminally ill patients, the McGill Quality of Life Questionnaire (McGill), and demographic items. Results: The battery of questionnaires took approximately 53 minutes; five of six participants were able to complete all items. Respondents reported moderate to severe pain (mean 4.3/10 for pain on average; 7/10 for worst pain in past 24 hours), and excellent medication adherence. When asked how much relief was provided by pain therapies, respondents reported a mean 73% (range 50-100%) relief. They expressed little concern about addiction, but more concern about medication-induced nausea and constipation. Overall QoL was good (mean 6.8/10, range 5-10, higher score better), with notably high scores in existential and support domains. Conclusions: Inpatients receiving palliative care consultation were able to complete interviewer-administered questionnaires regarding their pain perceptions, medications, and QoL. Further studies using these instruments are feasible and could inform shared decision making about pain management. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Therapy
 *Pain Perception
 *Palliative Care
 *Quality of Life
 *Treatment Compliance
 Risk Taking

Source: PsycINFO

Full Text: Available from *Highwire Press* in *American Journal of Hospice and Palliative Medicine*®

115. The abject failure of drug prohibition? Really?

Citation: Australian and New Zealand Journal of Criminology, August 2014, vol./is. 47/2(202-206), 0004-8658;1837-9273 (Aug 2014)

Author(s): Weatherburn, Don

Correspondence Address: Weatherburn, Don: NSW Bureau of Crime Statistics and Research, St James Centre, Level 8, Sydney, NSW, Australia, 2000, don_j_weatherburn@agd.nsw.gov.au

Institution: NSW Bureau of Crime Statistics and Research, St James Centre, Sydney, NSW, Australia

Language: English

Abstract: The principal weakness with Alex Wodak's response to my original article is that the points he makes, whether accepted or not, have little bearing on the arguments I put. He is right to point out that there are substantial human and financial costs associated with drug prohibition. I acknowledged these costs at some length in my original paper. The fundamental question for policy makers, however, is not whether drug prohibition carries significant human and financial costs. Most criminal prohibitions carry substantial human and financial costs. We maintain them because we believe they also produce benefits and that (for at least some outcomes) the benefits outweigh the costs. Wodak ignores or downplays the benefits associated with drug prohibition. His arguments betray a misunderstanding of the mechanisms through which prohibition operates and of the kind of evidence required to determine whether a particular drug policy is a success or failure. I conclude with Caulkins and Lee (2012) that, given current knowledge, legalisation of any addictive or dangerous drug would be a 'leap into uncharted and potentially dangerous waters'. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Criminal Justice](#)
[*Drug Laws](#)
[*Drug Usage](#)
[*Harm Reduction Failure](#)

Source: PsycINFO

116. The pros and cons of prohibiting drugs.

Citation: Australian and New Zealand Journal of Criminology, August 2014, vol./is. 47/2(176-189), 0004-8658;1837-9273 (Aug 2014)

Author(s): Weatherburn, Don

Correspondence Address: Weatherburn, Don: NSW Bureau of Crime Statistics and Research, St James Centre, Level 8, Sydney, NSW, Australia, 2000, don_j_weatherburn@agd.nsw.gov.au

Institution: NSW Bureau of Crime Statistics and Research, Sydney, NSW, Australia

Language: English

Abstract: In September 2012, a group known as Australia 21 called for a rethink on the prohibition against illegal drugs. If the response from Australian Federal, State, and Territory Governments is any guide, the call fell on deaf ears. In recent years, even scholarly debate about the merits of prohibition appears to have subsided. This paper acknowledges that social and financial costs of the prohibition against illegal drugs but argues that prohibition also prevents a great deal of harm. The multifarious nature of drug-related harm and the differences between people in the weight assigned to various harms makes it impossible say what policy best minimizes drug-related harm. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Criminal Law](#)

*Drug Usage
 *Harm Reduction
 Cannabis
 Illegal Drug Distribution

Source: PsycINFO

117. A counselling line for problem and pathological gambling in South Africa: Preliminary data analysis.

Citation: Journal of Behavioral Addictions, September 2014, vol./is. 3/3(199-202), 2062-5871;2063-5303 (Sep 2014)

Author(s): Sinclair, Heidi; Pretorius, Adele; Stein, Dan J

Correspondence Address: Sinclair, Heidi: Department of Psychiatry and Mental Health, University of Cape Town, Groote Schuur Hospital, (J2), Anzio Road, Observatory, Cape Town, South Africa, 7925, SNCHEI002@myuct.ac.za

Institution: Department of Psychiatry and Mental Health, University of Cape Town, Cape Town, South Africa; National Responsible Gambling Programme, South African Gambling Foundation, South Africa; Department of Psychiatry and Mental Health, University of Cape Town, Cape Town, South Africa

Language: English

Abstract: Objective: Various countries and states have established telephone counselling lines for people with pathological or problem gambling. Data from such services may contribute to describing systematically the nature of gambling problems in a particular area. To date, however, few data have been published on such a telephone counselling line in a low or middle income country. Method: Data on calls to the telephone counselling line of the National Responsible Gambling Foundation of South Africa were captured over a 6-month period. Such data include socio-demographic variables, the primary reason for calling, the source of the referral, preferred method of gambling, impairment as a consequence of gambling, and history of treatment for psychiatric disorders, comorbid alcohol abuse and illicit drug use. Results: Calls were received from a broad range of people; the mean age of callers was 37 years, the majority were male (62%) and many were married (45%). Primary reasons for calling included the feeling of being unable to stop gambling without the help of a professional (41%), financial concerns (32%), legal problems (13%), pressure from family (10%), and suicidal thoughts (2%). The majority of callers contacted the counselling line after having heard about it by word of mouth (70%). The most common forms of gambling were slot machines (51%) and casino games (21%). Fourteen percent of callers reported having received help for other psychiatric disorders, 11% reported alcohol use disorders and 6% illicit drug use. Conclusion: These data from South Africa are consistent with prior research indicating that pathological and problem gambling are seen in a range of socio-demographic groups, and that such behaviour is associated with significant morbidity and comorbidity. More work is needed locally to inform younger gamblers, gamblers using the informal gambling sector, and unemployed gamblers of the existing telephone counselling lines. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Behavior Therapy
 *Counseling
 *Hot Line Services
 *Pathological Gambling
 Addiction
 Help Seeking Behavior
 Telemedicine

Source: PsycINFO

118. Gamblers seeking treatment: Who does and who doesn't?

- Citation:** Journal of Behavioral Addictions, September 2014, vol./is. 3/3(189-198), 2062-5871;2063-5303 (Sep 2014)
- Author(s):** Braun, Barbara; Ludwig, Monika; Slecza, Pawel; Buhringer, Gerhard; Kraus, Ludwig
- Correspondence Address:** Braun, Barbara: IFT Institut für Therapieforchung, Parzivalstr. 25, Munich, Germany, 80804, braunbarbara@ift.de
- Institution:** IFT Institut für Therapieforchung, Munich, Germany; Institut für Psychologie, Universität Hildesheim, Hildesheim, Germany; IFT Institut für Therapieforchung, Munich, Germany; IFT Institut für Therapieforchung, Munich, Germany; IFT Institut für Therapieforchung, Munich, Germany
- Language:** English
- Abstract:** Background and aims: As only a minority of pathological gamblers (PGr) presents for treatment, further knowledge about help-seeking behavior is required in order to enhance treatment utilization. The present study investigated factors associated with treatment participation in gamblers in Germany. As subclinical pathological gamblers (SPGr, fulfilling one to four DSM-IV-criteria) are target of early intervention due to high risk of transition to pathological gambling, they were subject of special interest. Methods: The study analyzed data from a general population survey (n = 234, SPGr: n = 198, PGr: n = 36) and a treatment study (n = 329, SPGr: n = 22, PGr: n = 307). A two-step weighting procedure was applied to ensure comparability of samples. Investigated factors included socio-demographic variables, gambling behavior, symptoms of pathological gambling and substance use. Results: In PGr, regular employment and non-German nationality were positively associated with being in treatment while gambling on the Internet and gaming machines and fulfilling more DSM-IV-criteria lowered the odds. In SPGr, treatment attendance was negatively associated with married status and alcohol consumption and positively associated with older age, higher stakes, more fulfilled DSM-IV criteria and regular smoking. Conclusions: In accordance to expectations more severe gambling problems and higher problem awareness and/or external pressure might facilitate treatment entry. There are groups with lower chances of being in treatment: women, ethnic minorities, and SPGr. We propose target group specific offers, use of Internet-based methods as possible adaptations and/or extensions of treatment offers that could enhance treatment attendance. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Akademiai Kiado, Budapest; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Health Care Seeking Behavior](#)
[*Pathological Gambling](#)
[Addiction](#)
- Source:** PsycINFO

119. Motivational and psychological correlates of bodybuilding dependence.

- Citation:** Journal of Behavioral Addictions, September 2014, vol./is. 3/3(182-188), 2062-5871;2063-5303 (Sep 2014)
- Author(s):** Emini, Neim N; Bond, Malcolm J
- Correspondence Address:** Bond, Malcolm J.: School of Medicine, Flinders University, GPO Box 2100, Adelaide, SA, Australia, 5001, malcolm.bond@flinders.edu.au
- Institution:** School of Medicine, Flinders University, Adelaide, SA, Australia; School of Medicine, Flinders University, Adelaide, SA, Australia
- Language:** English
- Abstract:** Background and aims: Exercise may become physically and psychologically maladaptive if taken to extremes. One example is the dependence reported by some individuals who engage in weight training. The current study explored potential psychological, motivational, emotional and behavioural concomitants of bodybuilding dependence, with a particular focus on motives for weight training. Using a path analysis paradigm, putative

causal models sought to explain associations among key study variables. Methods: A convenience sample of 101 men aged between 18 and 67 years was assembled from gymnasia in Adelaide, South Australia. Active weight trainers voluntarily completed a questionnaire that included measures of bodybuilding dependence (social dependency, training dependency, and mastery), anger, hostility and aggression, stress and motivations for weight training. Results: Three motives for weight training were identified: mood control, physique anxiety and personal challenge. Of these, personal challenge and mood control were the most directly salient to dependence. Social dependency was particularly relevant to personal challenge, whereas training dependency was associated with both personal challenge and mood control. Mastery demonstrated a direct link with physique anxiety, thus reflecting a unique component of exercise dependence. Conclusions: While it was not possible to determine causality with the available data, the joint roles of variables that influence, or are influenced by, bodybuilding dependence are identified. Results highlight unique motivations for bodybuilding and suggest that dependence could be a result of, and way of coping with, stress manifesting as aggression. A potential framework for future research is provided through the demonstration of plausible causal linkages among these variables. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Intrinsic Motivation](#)
[*Physique](#)
[*Psychodynamics](#)
[*Weightlifting](#)
[Anxiety](#)
[Emotional States](#)
[Personality Correlates](#)

Source: PsycINFO

120. The (co-)occurrence of problematic video gaming, substance use, and psychosocial problems in adolescents.

Citation: Journal of Behavioral Addictions, September 2014, vol./is. 3/3(157-165), 2062-5871;2063-5303 (Sep 2014)

Author(s): Van Rooij, Antonius J; Kuss, Daria J; Griffiths, Mark D; Shorter, Gillian W; Schoenmakers, Tim M; Van De Mheen, Dike

Correspondence Address: Van Rooij, Antonius J.: IVO Addiction Research Institute, Heemraadssingel 194, Rotterdam, Netherlands, 3021 DM, rooij@ivo.nl

Institution: IVO Addiction Research Institute, Rotterdam, Netherlands; Birmingham City University, Birmingham, United Kingdom; International Gaming Research Unit, Psychology Division, Nottingham Trent University, Nottingham, United Kingdom; International Gaming Research Unit, Psychology Division, Nottingham Trent University, Nottingham, United Kingdom; IVO Addiction Research Institute, Rotterdam, Netherlands; IVO Addiction Research Institute, Rotterdam, Netherlands

Language: English

Abstract: Aims: The current study explored the nature of problematic (addictive) video gaming (PVG) and the association with game type, psychosocial health, and substance use. Methods: Data were collected using a paper and pencil survey in the classroom setting. Three samples were aggregated to achieve a total sample of 8478 unique adolescents. Scales included measures of game use, game type, the Video game Addiction Test (VAT), depressive mood, negative self-esteem, loneliness, social anxiety, education performance, and use of cannabis, alcohol and nicotine (smoking). Results: Findings confirmed problematic gaming is most common amongst adolescent gamers who play multiplayer online games. Boys (60%) were more likely to play online games than girls (14%) and problematic gamers were more likely to be boys (5%) than girls (1%). High problematic gamers showed higher scores on depressive mood, loneliness, social anxiety, negative self-esteem, and self-reported lower school performance. Nicotine, alcohol, and cannabis

using boys were almost twice more likely to report high PVG than non-users.
 Conclusions: It appears that online gaming in general is not necessarily associated with problems. However, problematic gamers do seem to play online games more often, and a small subgroup of gamers-specifically boys-showed lower psychosocial functioning and lower grades. Moreover, associations with alcohol, nicotine, and cannabis use are found. It would appear that problematic gaming is an undesirable problem for a small subgroup of gamers. The findings encourage further exploration of the role of psychoactive substance use in problematic gaming. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Psychopathology](#)
[*Comorbidity](#)
[*Computer Games](#)
[*Drug Abuse](#)
[*Psychosocial Development](#)
[Internet Addiction](#)
[Psychosocial Factors](#)
[Self Esteem](#)
[Social Anxiety](#)

Source: PsycINFO

121. Hatching the behavioral addiction egg: Reward Deficiency Solution System (RDSS) as a function of dopaminergic neurogenetics and brain functional connectivity linking all addictions under a common rubric.

Citation: Journal of Behavioral Addictions, September 2014, vol./is. 3/3(149-156), 2062-5871;2063-5303 (Sep 2014)

Author(s): Blum, Kenneth; Febo, Marcelo; Mclaughlin, Thomas; Cronje, Frans J; Han, David; Gold, Mark S

Correspondence Address: Blum, Kenneth: Department of Psychiatry, University of Florida, College of Medicine, PO Box 103424, Gainesville, FL, US, 32610-3424, drd2gene@gmail.com

Institution: Department of Psychiatry, University of Florida, College of Medicine, Gainesville, FL, US; Department of Psychiatry, University of Florida, College of Medicine, Gainesville, FL, US; Center for Psychiatric Medicine, North Andover, MA, US; University of Stellenbosch, Cape Town, South Africa; Department of Management Science and Statistics, University of Texas at San Antonio, San Antonio, TX, US; Department of Psychiatry, University of Florida, College of Medicine, Gainesville, FL, US

Language: English

Abstract: Background: Following the first association between the dopamine D2 receptor gene polymorphism and severe alcoholism, there has been an explosion of research reports in the psychiatric and behavioral addiction literature and neurogenetics. With this increased knowledge, the field has been rife with controversy. Moreover, with the advent of Whole Genome-Wide Studies (GWAS) and Whole Exome Sequencing (WES), along with Functional Genome Convergence, the multiple-candidate gene approach still has merit and is considered by many as the most prudent approach. However, it is the combination of these two approaches that will ultimately define real, genetic allelic relationships, in terms of both risk and etiology. Since 1996, our laboratory has coined the umbrella term Reward Deficiency Syndrome (RDS) to explain the common neurochemical and genetic mechanisms involved with both substance and non-substance, addictive behaviors. Methods: This is a selective review of peer-reviewed papers primary listed in Pubmed and Medline. Results: A review of the available evidence indicates the importance of dopaminergic pathways and resting-state, functional connectivity of brain reward circuits. Discussion: Importantly, the proposal is that the real phenotype is RDS and impairments in the brain's reward cascade, either genetically or environmentally (epigenetically) induced, influence both substance and non-substance, addictive behaviors. Understanding shared common mechanisms will ultimately lead to better diagnosis, treatment and prevention of relapse. While, at this juncture, we cannot as yet state that we have "hatched

the behavioral addiction egg", we are beginning to ask the correct questions and through an intense global effort will hopefully find a way of "redeeming joy" and permitting homo sapiens live a life, free of addiction and pain. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Dopamine Agonists](#)
[*Behavioral Genetics](#)
[*Biological Neural Networks](#)
[*Epigenetics](#)
[Genes](#)
[Polymorphism](#)
[Rewards](#)
[Syndromes](#)

Source: PsycINFO

122. The uses and abuses of Facebook: A review of Facebook addiction.

Citation: Journal of Behavioral Addictions, September 2014, vol./is. 3/3(133-148), 2062-5871;2063-5303 (Sep 2014)

Author(s): Ryan, Tracii; Chester, Andrea; Reece, John; Xenos, Sophia

Correspondence Address: Ryan, Tracii: School of Health Sciences, RMIT University, GPO Box 2476, Melbourne, VIC, Australia, 3001, tracii.ryan@rmit.edu.au

Institution: School of Health Sciences, RMIT University, Melbourne, VIC, Australia; School of Design and Social Context, RMIT University, Melbourne, VIC, Australia; School of Health Sciences, RMIT University, Melbourne, VIC, Australia; School of Health Sciences, RMIT University, Melbourne, VIC, Australia

Language: English

Abstract: Background and aims: Recent research suggests that use of social networking sites can be addictive for some individuals. Due to the link between motivations for media use and the development of addiction, this systematic review examines Facebook-related uses and gratifications research and Facebook addiction research. Method: Searches of three large academic databases revealed 24 studies examining the uses and gratifications of Facebook, and nine studies of Facebook addiction. Results: Comparison of uses and gratifications research reveals that the most popular motives for Facebook use are relationship maintenance, passing time, entertainment, and companionship. These motivations may be related to Facebook addiction through use that is habitual, excessive, or motivated by a desire for mood alteration. Examination of Facebook addiction research indicates that Facebook use can become habitual or excessive, and some addicts use the site to escape from negative moods. However, examination of Facebook addiction measures highlights inconsistency in the field. Discussion: There is some evidence to support the argument that uses and gratifications of Facebook are linked with Facebook addiction. Furthermore, it appears as if the social skill model of addiction may explain Facebook addiction, but inconsistency in the measurement of this condition limits the ability to provide conclusive arguments. Conclusions: This paper recommends that further research be performed to establish the links between uses and gratifications and Facebook addiction. Furthermore, in order to enhance the construct validity of Facebook addiction, researchers should take a more systematic approach to assessment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Mass Media](#)
[*Online Social Networks](#)

[*Websites](#)
[Motivation](#)

Source: PsycINFO

123. Perceptions of benzodiazepine dependence among women age 65 and older.

Citation: Journal of Gerontological Social Work, November 2014, vol./is. 57/8(872-888), 0163-4372;1540-4048 (Nov 2014)

Author(s): Canham, Sarah L; Gallo, Joseph; Simoni-Wastila, Linda

Correspondence Address: Canham, Sarah L.: IRMACS Centre, Simon Fraser University, 8888 University Drive, Burnaby, BC, Canada, V5A 1S6, scanham@sfu.ca

Institution: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, US; Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, US; Department of Pharmaceutical Health Services Research, University of Maryland Baltimore, School of Pharmacy, Baltimore, MD, US

Language: English

Abstract: A phenomenological study explored whether older women who are chronic benzodiazepine users identified themselves as dependent, how dependence was perceived, and how meanings and understandings shaped experiences of benzodiazepine use. Self-reported benzodiazepine dependence was associated with being unable to reduce use or a desire to discontinue use and reliance on benzodiazepines to remain comfortable and able to handle daily life. Themes included: (a) benzodiazepine dependence is similar to dependence to diabetes or blood pressure medications; (b) dependence is distinctive from addiction/abuse; (c) addiction/abuse is perceived as worse than dependence; and (d) concerns of addiction/abuse result in low-dose benzodiazepine use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: College on Problems of Drug Dependence Scientific Meeting. 2012. Palm Springs. CA, US. An earlier version of this article was presented as a poster at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Benzodiazepines](#)
[*Drug Dependency](#)
[*Drug Therapy](#)
[*Phenomenology](#)
[Human Females](#)

Source: PsycINFO

124. Spirituality and desistance from substance use among reentering offenders.

Citation: International Journal of Offender Therapy and Comparative Criminology, November 2014, vol./is. 58/11(1321-1339), 0306-624X;1552-6933 (Nov 2014)

Author(s): Bakken, Nicholas W; DeCamp, Whitney; Visher, Christy A

Correspondence Address: Bakken, Nicholas W.: Department of Sociology and Archaeology, University of Wisconsin-La Crosse, La Crosse, WI, US, 54601-3005, nbakken@uwlax.edu

Institution: University of Wisconsin-La Crosse, La Crosse, WI, US; Western Michigan University, Kalamazoo, MI, US; University of Delaware, Newark, DE, US

Language: English

Abstract: Prior research has indicated an inverse relationship between religion and criminal behavior; however, few studies have specifically examined the effect of spirituality on the desistance process among a contemporary and diverse sample of reentering drug-involved offenders. A comprehensive understanding of how spirituality is related to desistance from substance use can lead to more effective and evidence-based preventive and rehabilitative interventions. Using data from a longitudinal study of 920 diverse offenders

returning to the community after a period of incarceration, the current study examines three distinct forms of substance use (alcohol, marijuana, and cocaine) to gauge the effect that spirituality plays in the desistance process. The findings suggest a relatively high importance of spirituality in terms of preventing substance use during reentry, particularly concerning the use of both alcohol and cocaine. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Incarceration](#)
[*Religion](#)
[*Spirituality](#)

Source: PsycINFO

125. Relational vulnerabilities of incarcerated and reentry mothers: Therapeutic implications.

Citation: International Journal of Offender Therapy and Comparative Criminology, November 2014, vol./is. 58/11(1297-1320), 0306-624X;1552-6933 (Nov 2014)

Author(s): Few-Demo, April L; Arditti, Joyce A

Correspondence Address: Few-Demo, April L.: Department of Human Development, Virginia Tech, 401-A Wallace Hall (0416), Blacksburg, VA, US, 24061, alfew@vt.edu

Institution: Virginia Tech, Blacksburg, VA, US; Virginia Tech, Blacksburg, VA, US

Language: English

Abstract: A qualitative study involving a follow-up interview with 10 incarcerated and reentry mothers in rural southwest and central Virginia was conducted to explore the influence that women's close relationships have on their reentry experiences with their families. The Vulnerability Conceptual Model (VCM) was used to sensitize an examination of how incarcerated and reentry mothers negotiate relational vulnerabilities in the context of varying situational vulnerability. Grounded theory analysis revealed three themes that characterized relational vulnerabilities. Given our focus on close relationships and the potential of the VCM to identify opportunities for resilience and vulnerability, we highlighted the influence of ambiguous and ambivalent relationships and unresolved loss and grief due to relationship dissolution or the death of a parent, sibling, child, or intimate partner in the reentry process. The data revealed two types of reentry mothers with divergent trajectories for social reintegration. Implications of these types for therapeutic treatment approaches for reentry women are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Incarceration](#)
[*Intimate Partner Violence](#)
[*Mothers](#)
[*Interpersonal Relationships](#)
[Ambivalence](#)
[Prisoners](#)

Source: PsycINFO

126. Lifestyle practices, psychological well-being, and substance use among Chinese-Canadian youth.

Citation: Journal of Ethnic & Cultural Diversity in Social Work: Innovation in Theory, Research & Practice, October 2014, vol./is. 23/3-4(207-222), 1531-3204;1531-3212 (Oct 2014)

Author(s): Fang, Lin; Zhang, Vivian F; Poon, Helen Lai Man; Fung, Wai Lun Alan; Katakia, Dhvani

Correspondence Address: Fang, Lin: Factor-Inwentash Faculty of Social Work, University of Toronto, 246 Bloor Street West, Toronto, Canada, M5S 1V4, lin.fang@utoronto.ca

Institution: Factor-Inwentash Faculty of Social Work, University of Toronto, Toronto, ON, Canada; Factor-Inwentash Faculty of Social Work, University of Toronto, Toronto, ON, Canada; Hong Fook Mental Health Association, Toronto, ON, Canada; Department of Psychiatry, University of Toronto, Faculty of Medicine, Toronto, ON, Canada; Factor-Inwentash Faculty of Social Work, University of Toronto, Toronto, ON, Canada

Language: English

Abstract: Lifestyle factors serve an important determinant of health and are critical to youths' psychosocial development. This cross-sectional survey study aimed to assess the associations between lifestyle practices and mental health and substance use among a sample of 152 Chinese-Canadian youth in the Greater Toronto Area. Findings indicated that youths' sedentary behaviors are linked to increased depressed mood, stress, and suicidal ideation. Moreover, a lack of healthy eating habits is associated with increased substance use. The use of a buddy program, installation of peer counseling, and an implementation of a holistic health policy may help promote healthy living for Chinese-Canadian youth. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Chinese Cultural Groups](#)
[*Drug Abuse](#)
[*Lifestyle](#)
[*Mental Health](#)
[*Well Being](#)
[Psychosocial Development](#)

Source: PsycINFO

127. 'Why take chances?' advice on alcohol intake to pregnant and non-pregnant women in four Nordic countries.

Citation: Health, Risk & Society, August 2014, vol./is. 16/6(512-529), 1369-8575;1469-8331 (Aug 2014)

Author(s): Leppo, Anna; Hecksher, Dorte; Tryggvesson, Kalle

Correspondence Address: Leppo, Anna, anna.leppo@helsinki.fi

Institution: Department of Social Research, University of Helsinki, Helsinki, Finland; Department of Forensic Psychiatry, Aarhus University Hospital, Risskov, Denmark; Department of Criminology, University of Stockholm, Stockholm, Sweden

Language: English

Abstract: In this article we explore the construction of risk in government guidelines on alcohol intake during and before pregnancy in four Nordic countries given that there is no sound evidence linking a low level of alcohol intake during pregnancy to foetal harm. In the article we draw on two sources of data to examine the rationale behind the advice given to pregnant women: health education materials and other government documents, such as guidelines for professionals. We found that in all the four countries the government guidelines advised pregnant women to completely abstain from alcohol consumption, but there was some variation between the countries in the advice for non-pregnant women. The guidance in the four countries also differed in the extent to which they discussed the lack of evidence behind the abstinence advice and the precautionary approach on which the advice was based. In all the four countries the printed and widely circulated health education materials did not explain that the abstinence advice was not based on actual evidence of harm but on a precautionary approach. The other government documents adopted varying strategies for justifying the abstinence advice including not offering information about the uncertainty of the knowledge base, implying that there was evidence that low alcohol consumption was harmful to the foetus, acknowledging that a safe level of alcohol intake during pregnancy could not be specified and explaining the

precautionary approach to risk. In this article we argue that the shift from 'estimation of risk' to the 'precautionary principle' is a part of a wider socio-cultural push towards broader employment of the precautionary principle as a strategy to manage uncertainty, and in the context of pregnancy, it is a part of the symbolic struggle to protect the purity of the foetus and construct the 'perfect mother'. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholic Beverages](#)
[*Pregnancy](#)
[*Prevention](#)
[*Sobriety](#)
[*Uncertainty](#)
[Alcoholism](#)
[Human Females](#)

Source: PsycINFO

128. In memoriam.

Citation: Harvard Review of Psychiatry, September 2014, vol./is. 22/5(323), 1067-3229;1465-7309 (Sep-Oct 2014)

Author(s): No authorship indicated

Language: English

Abstract: Presents an obituary of Nancy K. Mello (1935-2013). Mello was a pioneer in substance abuse research and was a highly regarded researcher. She received both her undergraduate and graduate degrees from Pennsylvania State University. After receiving her PhD in Clinical Psychology in 1960, she was a postdoctoral trainee in physiology at Harvard Medical School and in the Experimental Analysis of Behavior Laboratory at Harvard University with Dr. B. F. Skinner. Dr. Mello then joined the Stanley Cobb Laboratories for Psychiatric Research at Massachusetts General Hospital and formed her first operant behavioral laboratory. Ultimately, in 1974, McLean Hospital recruited Dr. Mello and Dr. Mendelson to direct its alcohol and drug abuse research program. Mello's influence on the alcohol and drug abuse field is significant. She was among the first to research biological, behavioral, and social aspects of alcohol consumption and withdrawal in the Intramural Research Program of the National Center for Prevention and Control of Alcoholism at the National Institute of Mental Health—a program that she directed. She made many high-impact contributions to the scientific understanding of substance dependence and the neurobiologic effects of drugs and alcohol. Mello's expertise has been recognized and sought by many and received numerous accolades for her work. Researchers and clinicians recognize Mello as a pioneer in the field of substance abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: President and Fellows of Harvard College; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Experimenters](#)

Source: PsycINFO

129. Risk factors for youth problematic Internet use: A cross-sectional study.

Citation: Adolescent Psychiatry, 2014, vol./is. 4/2(122-129), 2210-6766;2210-6774 (2014)

Author(s): Cherif, Leila; Ayadi, Hela; Khemekhem, Souhel; Moalla, Youss; Ghribi, Farhat

Correspondence Address: Cherif, Leila: Departement of Child and Adolescent Psychiatry, Hedi Chaker Hospital, Majida Boulila Avenue, Sfax, Tunisia, 3029, leilacherifepboukettaya@yahoo.fr

Institution: Departement of Child and Adolescent Psychiatry, Hedi Chaker Hospital, Sfax, Tunisia; Departement of Child and Adolescent Psychiatry, Hedi Chaker Hospital, Sfax, Tunisia; Departement of Child and Adolescent Psychiatry, Hedi Chaker Hospital, Sfax, Tunisia; Departement of Child and Adolescent Psychiatry, Hedi Chaker Hospital, Sfax, Tunisia; Departement of Child and Adolescent Psychiatry, Hedi Chaker Hospital, Sfax, Tunisia

Language: English

Abstract: Objective: The aim of this study was to identify correlates that might constitute risk factors for Problematic Internet Use (PIU) among urban Tunisian high school students. Methods: This cross-sectional study was carried out on 587 secondary school students, aged 14 to 20 years. They were recruited from seven secondary schools randomly selected in the urban area of Sfax. The self-administered Young's 8-item questionnaire was used in this survey. To identify an associated video game addiction, Fisher's 9-item questionnaire was used. The Hospital Anxiety and Depression (HAD) scale was administered to screen for anxiety and depression symptoms. Results: Individual risk factors were a lack of social activity ($p=0.008$), anxiety symptoms ($p=0.000$), an associated video game addiction ($p=0.000$), and the problematic consumption of tobacco ($p=0.038$) and alcohol ($p=0.005$). PIU was also significantly associated with poor relationships within the family ($p=0.000$), an interest in advertising on the Internet ($p=0.02$), time spent surfing the Internet per day ($p=0.000$), and mothers' employment as mid to high level executives ($p=0.003$). Parental limitations on amount of time spent on the Internet emerged as an important protective factor ($p=0.02$). Conclusion: The identification of risk factors can help to identify individuals who may be at high risk, and alert mental health providers to be careful to screen these patients for PIU. Total avoidance of the Internet is unrealistic and inadvisable, but a preventive outreach for youth, their families and health professionals may help to limit the onset of PIU among young people. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*High School Students](#)
[*Internet Addiction](#)
[*Mass Media](#)
[*Risk Factors](#)
[Adolescent Attitudes](#)

Source: PsycINFO

130. Problematic internet use: A case of social media addiction.

Citation: Adolescent Psychiatry, 2014, vol./is. 4/2(112-115), 2210-6766;2210-6774 (2014)

Author(s): DeJong, Sandra M

Correspondence Address: DeJong, Sandra M.: Division of Child and Adolescent Psychiatry, Cambridge Hospital, 1493 Cambridge St, Cambridge, MA, US, 02139, sdejong@challiance.org

Institution: Cambridge Health Alliance, Cambridge, MA, US

Language: English

Abstract: Background: Internet addiction, also called Problematic internet use, has an estimated prevalence globally of 5-10%, quickly becoming an increasingly important clinical problem in adolescent psychiatry. Method: A case of social media addiction in a 13-year-old girl is presented and discussed using Tam and Walter's "Basic Model of PIU in Youth" (Tam and Walter, 2013). Potential treatment approaches are also reviewed. Results: While many cases of internet addiction focus on online gaming, problematic use of social media is also common, particularly in adolescent girls. Defined as internet use that creates difficulties in psychological, social, academic and/or work domains, it has lacked a unified conceptual and treatment approach. Conclusion: Internet addiction is an increasingly recognized clinical problem that arises in the context of a constellation of

individual and parenting factors and that poses unique treatment dilemmas for clinicians. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Internet Addiction](#)
[*Internet Usage](#)
[*Social Media](#)
[Adolescent Attitudes](#)
[Behavior Problems](#)
[Case Report](#)

Source: PsycINFO

131. Helping parents promote healthy and safe computer habits.

Citation: Adolescent Psychiatry, 2014, vol./is. 4/2(92-97), 2210-6766;2210-6774 (2014)

Author(s): Weigle, Paul; Reid, Dana

Correspondence Address: Weigle, Paul: Natchaug Hospital, Mansfield Center, 189 Storrs Road, PO Box 260, CT, US, 06250-0260, paul.weigle@hhchealth.org

Institution: Natchaug Hospital, Mansfield Center, CT, US

Language: English

Abstract: Background: Use of computer technologies, whether online or playing video games, can pose significant and inherent mental health risks for children and adolescents. Parents are in the best position to influence and control their child's computer experiences and habits, and so it is the duty of mental health providers to inform parents about these risks and how they can be mitigated. Method: This article reviews trends in media use and mental health implications and outlines various steps that parents can take to prevent harmful aspects of such use. Practical challenges and solutions are discussed. Results: Many parents are unaware of what their children are doing online and the steps they can take to help keep them safe. Children do respond positively to parental monitoring, although this is often a source of conflict. Both external methods, such as placing controls on electronic devices and limiting access, as well as communication with children about safe and healthy use of electronic media are effective. Conclusions: Parents should monitor and as necessary restrict the amount and the content of computer use their children engage in. Parents should teach their children online etiquette and warn them about online risks including sexting and cyberbullying, and watch for signs of such problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Childrearing Practices](#)
[*Computer Games](#)
[*Primary Mental Health Prevention](#)
[*Social Media](#)
[Behavior Problems](#)
[Habits](#)
[Health Behavior](#)
[Internet](#)
[Parents](#)
[Technology](#)
[Online Social Networks](#)

Source: PsycINFO

132. Internet and video game addiction: Evidence & controversy.

Citation: Adolescent Psychiatry, 2014, vol./is. 4/2(81-91), 2210-6766;2210-6774 (2014)

Author(s): Weigle, Paul

Correspondence Address: Weigle, Paul: Natchaug Hospital, Mansfield Center, 189 Storrs Road, PO Box 260, CT, US, 06250-0260, paul.weigle@hhchealth.org

Institution: Natchaug Hospital, Mansfield Center, CT, US

Language: English

Abstract: Background: In recent years child and adolescent engagement in online activities and video games has increased dramatically to the point that it dominates the free time of many youth. Many young people seem unable to control their excessive use of technology in spite of consequences which impair aspects of their daily functioning. Methods: This article summarizes the literature regarding pathological video game and Internet use and presents proposed criteria and recommendations for assessment and treatment. Results: A sizable body of recently published research consistently demonstrates that a minority of youth develop symptoms consistent with a behavioral addiction to the Internet and video games, although there is no officially recognized diagnosis which describes the syndrome. Conclusions: Knowledge of current research findings, including epidemiology, will help enable mental health to recognize and appropriately care for patients suffering from these problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Psychiatry](#)
[*Computer Games](#)
[*Internet Addiction](#)
[*Social Media Behavior Problems](#)

Source: PsycINFO

133. Characterising the psychiatric comorbidities among adults with ADHD who have a history of offending.

Citation: Journal of Forensic Psychiatry & Psychology, September 2014, vol./is. 25/5(535-555), 1478-9949;1478-9957 (Sep 2014)

Author(s): Scully, Claudia; Young, Susan; Bramham, Jessica

Correspondence Address: Bramham, Jessica, jessica.bramham@ucd.ie

Institution: Department of Psychology, University College Dublin, Dublin, Ireland; Institute of Psychiatry, King's College London, London, United Kingdom; Department of Psychology, University College Dublin, Dublin, Ireland

Language: English

Abstract: The prevalence of attention deficit hyperactivity disorder (ADHD) among adult offenders is significantly higher than in the general population. Adults with ADHD often present with multiple psychiatric comorbidities. This study aims to characterise the comorbidities presented by adults with ADHD who have offended and also to investigate predictors of offending among this population. Seventy-three participants with a diagnosis of adult ADHD were divided into a group with a history of offending behaviour (n = 30) and a group of non-offenders (n = 43). Groups were compared on measures of ADHD symptoms, substance use and DSM-IV Axis I and Axis II disorders using the Millon Clinical Multiaxial Inventory-3rd Edition. Major depression, cannabis use and childhood hyperactivity-impulsivity symptoms predicted offending. These findings indicate that adults with ADHD who have a history of offending behaviour are more likely to present with complex psychiatric needs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Attention Deficit Disorder with Hyperactivity](#)

*Comorbidity
 *Criminals
 *Epidemiology
 *Psychiatric Symptoms
 Drug Abuse
 Drug Usage
 Mentally Ill Offenders
 Prisoners

Source: PsycINFO

134. Problems with the identification of 'problematic' cannabis use: Examining the issues of frequency, quantity, and drug use environment.

Citation: European Addiction Research, September 2014, vol./is. 20/5(254-267), 1022-6877;1421-9891 (Sep 2014)

Author(s): Asbridge, Mark; Duff, Cameron; Marsh, David C; Erickson, Patricia G

Correspondence Address: Asbridge, Mark: Department of Community Health and Epidemiology, Dalhousie University, Centre for Clinical Research, 4th Floor 5790 University Avenue, Halifax, NS, Canada, B3H 1V7, mark.asbridge@dal.ca

Institution: Department of Community Health and Epidemiology, Dalhousie University, Halifax, NS, Canada; Social Sciences and Health Research Unit, School of Psychology and Psychiatry, Monash University, Melbourne, VIC, Australia; Northern Ontario School of Medicine, Sudbury, ON, Canada; Centre for Addiction and Mental Health, University of Toronto, Toronto, ON, Canada

Language: English

Abstract: Considerable recent attention has focused on how harmful or problematic cannabis use is defined and understood in the literature and put to use in clinical practice. The aim of the current study is to review conceptual and measurement shortcomings in the identification of problematic cannabis use, drawing on the WHO ASSIST instrument for specific examples. Three issues with the current approach are debated and discussed: (1) the identification of problematic cannabis use disproportionately relies on measures of the frequency of cannabis consumption rather than the harms experienced; (2) the quantity consumed on a typical day is not considered when assessing problematic use, and (3) screening tools for problematic use employ a 'one-size-fits-all approach' and fail to reflect on the drug use context (networks and environment). Our commentary tackles each issue, with a review of relevant literature coupled with analyses of two Canadian data sources—a representative sample of the Canadian adult population and a smaller sample of adult, regular, long-term cannabis users from four Canadian cities—to further articulate each point. This article concludes with a discussion of appropriate treatment interventions and approaches to reduce cannabis-related harms, and offers suggested changes to improve the measurement of problematic cannabis use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabis
 *Drug Abuse
 Addiction
 Screening

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#) ; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

135. Influence of parental alcohol-related attitudes, behavior and parenting styles on alcohol use in late and very late adolescence.

Citation: European Addiction Research, September 2014, vol./is. 20/5(241-247), 1022-6877;1421-9891 (Sep 2014)

Author(s): Stafstrom, Martin

Correspondence Address: Stafstrom, Martin: Division of Social Medicine and Global Health, Department of Clinical Sciences, Lund University, UMAS, Malmo, Sweden, SE 205 02, martin.stafstrom@med.lu.se

Institution: Division of Social Medicine and Global Health, Department of Clinical Sciences, Lund University, UMAS, Malmo, Sweden

Language: English

Abstract: Parents influence adolescent drinking behavior, but to what extent does this association diminish with age, however? The cross-sectional data was drawn from the Scania drug use survey 2007, consisting of 4,828 secondary education students in the 9th and 11th grade. The age- and gender-adjusted findings indicate that having parents who are consenting to alcohol use (OR 1.4), having been provided with alcohol by one's parents (OR 1.8), having parents with an authoritarian (OR 1.5) or neglectful (OR 2.1) parenting style, and having parents who both have a university degree (OR 1.3) were factors significantly associated with monthly heavy episodic drinking. These findings lead to the conclusion that parenting styles as well as parental attitudes and behaviors are important throughout the high school years. Thus, prevention targeting parents should emphasize both these domains. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Alcoholism](#)
[*Drinking Behavior](#)
[Parent Child Relations](#)
[Parenting Style](#)
[Parents](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#) ; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

136. Physical and mental health and social functioning in older alcohol- dependent inpatients: The role of age of onset.

Citation: European Addiction Research, September 2014, vol./is. 20/5(226-232), 1022-6877;1421-9891 (Sep 2014)

Author(s): van den Berg, Julia F; Hermes, Jolanda S. J; van den Brink, Wim; Blanken, Peter; Kist, Nicolien; Kok, Rob M

Correspondence Address: van den Berg, Julia F.: Parnassia Psychiatric Institute, Mangostraat 1, The Hague, Netherlands, NL 2552 KS, j.vandenberg@parnassia.nl

Institution: Parnassia Psychiatric Institute, The Hague, Netherlands; Parnassia Psychiatric Institute, The Hague, Netherlands; Academic Psychiatric Center (AMC), UvA, Amsterdam, Netherlands; Parnassia Addiction Research Centre (PARC), Brijder Addiction Treatment, The Hague, Netherlands; Parnassia Psychiatric Institute, The Hague, Netherlands; Parnassia Psychiatric Institute, The Hague, Netherlands

Language: English

Abstract: Aims: Age of onset is an important criterion to distinguish subgroups of alcohol-dependent patients. This study investigated physical and mental health and social functioning of older inpatients with early (age <25), late (25-44), and very late (> 45) onset of alcohol dependence. Methods: In a specialized detoxification ward for older

patients in The Hague, the Netherlands, 157 older alcohol-dependent inpatients (38% women, mean age 62.7 + 6.5) were interviewed with the European version of the Addiction Severity Index. Results: As a group, older alcohol-dependent patients had substantial physical, mental and social problems, which were largely independent of the age of onset of alcohol dependence. Patients with early-onset alcohol dependence had more chronic medical problems and more suicidal thoughts than patients with late-onset alcohol dependence. The very-late-onset group did not significantly differ from the other two groups in any of the variables under study. Conclusions: Despite previous studies showing more favourable outcomes for the (very) late-onset compared to the early-onset alcohol-dependent group, their comorbid (mental) health and social problems are in many respects similar, and require careful assessment and treatment. This may be crucial for successful treatment and improving quality of life in these patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Aging](#)
[*Alcoholism](#)
[*Mental Health](#)
[*Onset \(Disorders\)](#)
[*Physical Health](#)
[Ability Level](#)
[Age Differences](#)
[Geriatrics](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

137. Estimating the harms of nicotine-containing products using the MCDA approach.

Citation: European Addiction Research, September 2014, vol./is. 20/5(218-225), 1022-6877;1421-9891 (Sep 2014)

Author(s): Nutt, David J; Phillips, Lawrence D; Balfour, David; Curran, H. Valerie; Dockrell, Martin; Foulds, Jonathan; Fagerstrom, Karl; Letlape, Kgosi; Milton, Anders; Polosa, Riccardo; Ramsey, John; Sweanor, David

Correspondence Address: Nutt, David J.: Imperial College London, Burlington Danes Building, London, United Kingdom, W12 ONN, d.nutt@imperial.ac.uk

Institution: Imperial College London, London, United Kingdom; Department of Management, London School of Economics and Political Science, London, United Kingdom; University of Dundee, Dundee, United Kingdom; University College London, London, United Kingdom; Action on Smoking and Health London, London, United Kingdom; Pennsylvania State University, College of Medicine, Hershey, PA, US; Fagerstrom Consulting, Vaxholm, Sweden; World Medical Association, Johannesburg, South Africa; World Medical Association, Milton Consulting, Stockholm, Sweden; Centre for the Prevention and Cure of Tobacco Use, University of Catania, Catania, Italy; TICTAC Communications Ltd., St. George's University of London, London, United Kingdom; Faculty of Law, University of Ottawa, Ottawa, ON, Canada

Language: English

Abstract: Background: An international expert panel convened by the Independent Scientific Committee on Drugs developed a multi-criteria decision analysis model of the relative importance of different types of harm related to the use of nicotine-containing products. Method: The group defined 12 products and 14 harm criteria. Seven criteria represented harms to the user, and the other seven indicated harms to others. The group scored all the products on each criterion for their average harm worldwide using a scale with 100 defined as the most harmful product on a given criterion, and a score of zero defined as no harm. The group also assessed relative weights for all the criteria to indicate their

relative importance. Findings: Weighted averages of the scores provided a single, overall score for each product. Cigarettes (overall weighted score of 100) emerged as the most harmful product, with small cigars in second place (overall weighted score of 64). After a substantial gap to the third-place product, pipes (scoring 21), all remaining products scored 15 points or less. Interpretation: Cigarettes are the nicotine product causing by far the most harm to users and others in the world today. Attempts to switch to non-combusted sources of nicotine should be encouraged as the harms from these products are much lower. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

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

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

138. Can alcohol dependent patients adhere to an 'as-needed' medication regimen?

Citation: European Addiction Research, September 2014, vol./is. 20/5(209-217), 1022-6877;1421-9891 (Sep 2014)

Author(s): Sinclair, Julia; Chick, Jonathan; Sorensen, Per; Kiefer, Falk; Batel, Philippe; Gual, Antoni

Correspondence Address: Sinclair, Julia: University Department of Psychiatry Academic Centre, College Keep, 4-12 Terminus Terrace, Southampton, United Kingdom, SO14 3DT, julia.sinclair@soton.ac.uk

Institution: Faculty of Medicine, University of Southampton, Southampton, United Kingdom; Queen Margaret University, Edinburgh, United Kingdom; H. Lundbeck A/S, Copenhagen, Denmark; Department of Addictive Behaviour and Addiction Medicine, Central Institute of Mental Health, Mannheim, Germany; Department of Psychiatry and Addictive Diseases, Assistance Publique Hopitaux de Paris, Paris, France; Neurosciences Institute, Hospital Clinic, IDIBAPS, Barcelona, Spain

Language: English

Abstract: A pooled analysis of 'as-needed medication use' data from 1,276 patients in two randomised, double-blind, placebo-controlled, parallel-group trials of nalmefene in the treatment of alcohol dependence was performed to explore whether an 'as-needed' regimen is an acceptable and feasible strategy in patients seeking help for alcohol dependence. Adherence was defined as alcohol consumption and medication intake, or no alcohol consumption (with or without medication intake). Nalmefene was taken on approximately half of the study days; placebo was taken more often than nalmefene (52.8 vs. 64.5% of days, respectively). In each treatment group medication intake appeared to vary according to patients' needs in that intake correlated with the baseline drinking pattern. Sixty-eight percent of the nalmefene- treated patients (78% of the study completers) adhered to the as-needed treatment regimen on at least 80% of the study days. In conclusion, as-needed use is a feasible, patient-centred approach that engages patients with alcohol dependence in the active management of their illness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Drug Therapy](#)
[*Placebo](#)

[*Treatment Compliance](#)
[Patients](#)

Source: PsycINFO
Full Text: Available from *Karger Medical and Scientific Publishers* in [European Addiction Research](#) ; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

139. Mental, neurological, and substance use disorders in people living with HIV/AIDS in low- and middle-income countries.

Citation: JAIDS Journal of Acquired Immune Deficiency Syndromes, September 2014, vol./is. 67/1(s54-s67), 1525-4135;1077-9450 (Sep 1, 2014)

Author(s): Chibanda, Dixon; Benjamin, Laura; Weiss, Helen A; Abas, Melanie

Correspondence Address: Chibanda, Dixon: Department of Psychiatry, University of Zimbabwe, P.O. Box A178, Harare, Zimbabwe, dichi@zol.co.zw

Institution: Department of Psychiatry, University of Zimbabwe, Harare, Zimbabwe; Institute of Infection and Global Health, University of Liverpool, Liverpool, United Kingdom; MRC Tropical Epidemiology Group, Faculty of Epidemiology and Population Health, London School of Hygiene and Tropical Medicine, London, United Kingdom; Department of Psychiatry, University of Zimbabwe, Harare, Zimbabwe

Language: English

Abstract: Depression, alcohol use disorders (AUD), and neurocognitive disorders are the 3 most prevalent mental, neurological, and substance use disorders in people living with HIV infection in low- and middle-income countries (LMICs). Importantly, they have an impact on everyday functions and on HIV outcomes. Many LMICs have validated tools to screen for and diagnose depression and AUD in the general population that can be used among people living with HIV infection. Current screening and diagnostic methods for HIV-associated neurocognitive disorders in the era of antiretroviral therapy are suboptimal and require further research. In our view, 2 research priorities are most critical. One is the development of an integrated screening approach for depression, AUD, and neurocognitive disorders that can be used by nonspecialists in LMICs. Second, research is needed on interventions for depression and AUD that also target behavior change, as these could impact on adherence to antiretroviral therapy and improve mental symptoms. Mentorship and fellowship schemes at an individual and institutional level need to be further supported to build capacity and provide platforms for research on HIV and mental, neurological, and substance use disorders in LMICs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited; HOLDER: Lippincott Williams & Wilkins

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*AIDS](#)
[*Developing Countries](#)
[*Drug Abuse](#)
[*Mental Disorders](#)
[*Nervous System Disorders](#)
[Alcohol Abuse](#)
[Cognitive Impairment](#)
[Major Depression](#)

Source: PsycINFO
Full Text: Available from *Ovid* in [JAIDS Journal of Acquired Immune Deficiency Syndromes](#)

140. Employment-based training on alcohol and other drugs in England: Bridging the gap.

Citation: Social Work Education, August 2014, vol./is. 33/6(760-773), 0261-5479 (Aug 2014)

Author(s): Allnock, Debra; Hutchinson, Aisha

Correspondence Address: Allnock, Debra: University of Bedfordshire, University Square, 4th Floor, Luton, United Kingdom, LU1 3JU, Debra.allnock@beds.ac.uk

Institution: University of Bedfordshire, United Kingdom; University of Bedfordshire, United Kingdom

Language: English

Abstract: The first of its kind in England, this study explored the extent and nature of employer-based training on alcohol and other drugs for social workers working in children's and adults' services. A national survey of workforce development departments was undertaken to find out how social workers are being prepared by their employers for engaging with people who use alcohol and other drugs. Based on a response rate of 46%, the findings show that a majority of departments (82%) provided training on these issues in the year 2011-2012. However, most of this training was not mandatory. These courses are targeted most often at those working in children's services rather than those in adults' services. Most courses are offered at basic or intermediary level, and content of training is covered inconsistently. These findings suggest a need to increase the priority of alcohol and other drugs' training across adults' services in particular and to make this training mandatory, as well as ensuring that staff have adequate time and incentive to attend. Effectiveness of social care practice for all social care practitioners around alcohol and other drugs use could be improved with more focus on training practitioners how to talk to service users about their substance use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Drug Abuse](#)
[*Personnel Training](#)
[*Social Workers](#)

Source: PsycINFO

141. Multiday administration of ivermectin is effective in reducing alcohol intake in mice at doses shown to be safe in humans.

Citation: NeuroReport: For Rapid Communication of Neuroscience Research, September 2014, vol./is. 25/13(1018-1023), 0959-4965;1473-558X (Sep 10, 2014)

Author(s): Yardley, Megan M; Neely, Michael; Huynh, Nhat; Asatryan, Liana; Louie, Stan G; Alkana, Ronald L; Davies, Daryl L

Correspondence Address: Davies, Daryl L.: Titus Family Department of Clinical Pharmacy and Pharmaceutical Economics and Policy, School of Pharmacy, University of Southern California, 1985 Zonal Avenue, Los Angeles, CA, US, 90033, ddavies@usc.edu

Institution: Department of Pharmacology and Pharmaceutical Sciences, University of Southern California, Los Angeles, CA, US; Department of Pediatrics, Keck School of Medicine, University of Southern California, Los Angeles, CA, US; Titus Family Department of Clinical Pharmacy and Pharmaceutical Economics and Policy, School of Pharmacy, University of Southern California, Los Angeles, CA, US; Titus Family Department of Clinical Pharmacy and Pharmaceutical Economics and Policy, School of Pharmacy, University of Southern California, Los Angeles, CA, US; Department of Pharmacology and Pharmaceutical Sciences, University of Southern California, Los Angeles, CA, US; Department of Pharmacology and Pharmaceutical Sciences, University of Southern California, Los Angeles, CA, US; Titus Family Department of Clinical Pharmacy and Pharmaceutical Economics and Policy, School of Pharmacy, University of Southern California, Los Angeles, CA, US

Language: English

Abstract: Ivermectin (IVM), an FDA approved anthelmintic agent, can significantly reduce ethanol intake in mice following acute administration. The current study evaluates the sustainability and safety of multiday IVM administration in reducing 10% v/v ethyl

alcohol (10E) intake in mice at a dose shown to be safe in humans. We tested the effect of 10-day administration of IVM (3.0 mg/kg/day; intraperitoneally) on reducing 10E intake in C57BL/6J mice using a 24-h, two-bottle choice paradigm. On the 10th day of IVM administration, mice were sacrificed at 0, 0.5, 2, 8, 32, 48, and 72 h after injection. Brain tissue and plasma samples were collected and analyzed using liquid chromatography with tandem mass spectrometry (LCMS/MS). Analysis of variance (ANOVA) was used to assess the effect of 10-day IVM administration on 10E intake, 10E preference, water intake, and total fluid intake with Dunnett's multiple comparison post-hoc test. Individual Student's t-tests were also used to further quantify changes in these dependent variables. IVM significantly decreased 10E intake over a 9-day period ($P < 0.01$). Pre-IVM 10E intake was 9.1 ± 3.2 g/kg/24 h. Following the 9th day of IVM injections, intake dropped by almost 30% ($P < 0.05$). IVM had no effect on total water intake or mouse weight throughout the study; however, there was a significant decrease in both preference for 10E ($P < 0.01$) and total fluid intake ($P < 0.05$). Multiday administration of IVM significantly reduces 10E intake and preference in animals without causing any apparent adverse effects at a dose shown to be safe in humans. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Wolters Kluwer Health ; Lippincott Williams & Wilkins; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drugs](#)
[Alcoholism](#)
[Animal Models](#)
[Development](#)
[Drug Therapy](#)
[Mice](#)
[Treatment](#)

Source: PsycINFO

142. Attenuation by baclofen of nicotine rewarding properties and nicotine withdrawal manifestations.

Citation: Psychopharmacology, August 2014, vol./is. 231/15(3031-3040), 0033-3158;1432-2072 (Aug 2014)

Author(s): Varani, Andres P; Aso, Ester; Moutinho, Lirane Machado; Maldonado, Rafael; Balerio, Graciela N

Correspondence Address: Balerio, Graciela N.: Catedra de Farmacologia, Facultad de Farmacia y Bioquimica, Universidad de Buenos Aires, Junin 956 5 Piso, Buenos Aires, Argentina, C1113AAD, gbalerio@ffyb.uba.ar

Institution: Instituto de Investigaciones Farmacologicas, CONICET, Buenos Aires, Argentina; Laboratori de Neurofarmacologia, Facultat de Ciencies de la Salut i de la Vida, Universitat Pompeu Fabra, Barcelona, Spain; Instituto de Investigaciones Farmacologicas, CONICET, Buenos Aires, Argentina; Laboratori de Neurofarmacologia, Facultat de Ciencies de la Salut i de la Vida, Universitat Pompeu Fabra, Barcelona, Spain; Instituto de Investigaciones Farmacologicas, CONICET, Buenos Aires, Argentina

Language: English

Abstract: Rationale: Nicotine is a major active ingredient in tobacco and plays a major role in tobacco addiction. In rodents, repeated nicotine administration produces behavioral responses related to its addictive properties, such as reinforcing effects and physical dependence. Objectives: The aim of the present study was to evaluate the possible role of GABAB receptor in responses induced by repeated nicotine administration in Swiss Webster mice. Results: Nicotine hydrogen tartrate salt (0.5 mg/kg, s.c.) administration induced rewarding properties in the conditioning place preference test. The GABAB receptor agonist, baclofen (3 mg/kg, i.p.) abolished the rewarding properties induced by nicotine hydrogen tartrate salt (0.5 mg/kg, s.c.). In addition, naloxone-precipitated nicotine withdrawal induced somatic manifestations, anxiety-like effects in the elevated plus maze test and dysphoric manifestations in the conditioned place aversion paradigm. Baclofen (2 and 3 mg/kg, i.p.) prevented the somatic manifestations and the anxiety-like effects associated with naloxone-precipitated nicotine withdrawal but not the dysphoric

manifestations. Conclusions: These results showed that nicotine rewarding properties and negative aspects of nicotine withdrawal, such as anxiety-like effects and somatic manifestations, can be modulated by the GABAB receptor activity. This study now reveals a novel possible application of baclofen to develop new therapeutic strategies to achieve smoking cessation. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag Berlin Heidelberg; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Anxiety](#)
[*Baclofen](#)
[*Nicotine](#)
[Mice](#)

Source: PsycINFO

143. Impact of SenseCam on memory, identity and mood in Korsakoff's syndrome: A single case experimental design study.

Citation: Neuropsychological Rehabilitation, July 2014, vol./is. 24/3-4(400-418), 0960-2011;1464-0694 (Jul 2014)

Author(s): Svanberg, Jenny; Evans, Jonathan J

Correspondence Address: Svanberg, Jenny: Forth Valley Substance Misuse Service, Stirling Community Hospital, Stirling, United Kingdom, FK8 2AU, jenny.svanberg@nhs.net

Institution: Alcohol Related Brain Damage Team, Glasgow Addiction Service, Glasgow, United Kingdom; Institute of Health and Wellbeing, Glasgow University, Glasgow, United Kingdom

Language: English

Abstract: This study aimed to investigate the impact of SenseCam, a wearable, automatic camera, on subjective mood and identity in a patient with severe memory impairment due to Korsakoff's syndrome. It was hypothesised that SenseCam would improve Ms A's mood and identity through enhancing recall of autobiographical memories of recent events, therefore supporting a coherent sense of self; the lack of which was contributing to Ms A's mood deterioration. An ABA single case experimental design investigated whether using SenseCam to record regular activities impacted on Ms A's mood and identity. Ms A experienced improved recall for events recorded using SenseCam, and showed improvement on subjective ratings of identity. However, a corresponding improvement in mood was not seen, and the study was ended early at Ms A's request. Qualitative information was gathered to explore Ms A's experience of the study, and investigate psychosocial factors that may have impacted on the use of SenseCam. SenseCam may be of significant use as a compensatory memory aid for people with Korsakoff's syndrome and other types of alcohol-related brain damage (ARBD), but acceptance of memory impairment and consistent support may be among the factors required to support the use of such assistive technologies in a community setting. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cameras](#)
[*Emotional States](#)
[*Korsakoffs Psychosis](#)
[Alcohols](#)
[Amnesia](#)
[Brain Damage](#)
[Rehabilitation](#)

Source: PsycINFO

144. Prevalence of diagnosed opioid abuse and its economic burden in the Veterans Health Administration.

- Citation:** Pain Practice, June 2014, vol./is. 14/5(437-445), 1530-7085;1533-2500 (Jun 2014)
- Author(s):** Baser, Onur; Xie, Lin; Mardekian, Jack; Schaaf, David; Wang, Li; Joshi, Ashish V
- Correspondence Address:** Baser, Onur: STATinMED Research, University of Michigan, 211 N. Fourth Avenue, Suite 2B, Ann Arbor, MI, US, 48104, obaser@statinmed.com
- Institution:** STATinMED Research, Ann Arbor, MI, US; STATinMED Research, Ann Arbor, MI, US; Pfizer, Inc., New York, NY, US; Pfizer, Inc., New York, NY, US; STATinMED Research, Dallas, TX, US; Shire Pharmaceuticals, Wayne, PA, US
- Language:** English
- Abstract:** Objective: Evaluate prevalence and risk-adjusted healthcare costs of diagnosed opioid abuse in the national Veterans Health Administration (VHA). Costs were compared between patients with and without diagnosed opioid abuse. Design: Medical and pharmacy claims analysis of VHA data (10/01/2006 to 09/30/2010) were retrospectively analyzed. Prevalence was calculated as the percent of patients with diagnosed opioid abuse for the entire VHA membership and those with noncancer pain diagnoses, compared between patients prescribed opioids prior to abuse diagnosis and those not prescribed opioids through the VHA system. Healthcare utilization and costs were estimated using matching techniques and generalized linear models to control for clinical and demographic differences between patients with and without diagnosed opioid abuse. Separate comparisons were made (with diagnosed abuse vs. without) for each cohort: patients with/without opioid prescriptions. Results: Five-year diagnosed opioid abuse was 1.11%. Among patients prescribed opioids, 5-year abuse prevalence was 3.04%. Pain patients prescribed opioids had the highest abuse rate at 3.26%. Adjusted annual healthcare costs for diagnosed opioid abuse patients were higher than for those without diagnosed abuse, (prescribed opioids overall healthcare costs: \$28,882, with diagnosed abuse vs. \$13,605 for those without; not prescribed opioids: \$25,197 vs. \$6350, P-value < 0.0001; opioid-specific healthcare costs for patients prescribed opioids: \$8956 vs. \$218; patients not prescribed opioids: \$8733 vs. \$20). Conclusions: Diagnosed opioid abuse prevalence is almost 7-fold higher in the veteran's administration population than in commercial health plans and translates to a significant economic burden. Appropriate interventions should be considered to prevent and reduce opioid abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: World Institute of Pain; YEAR: 2013
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Health Care Costs](#)
[*Opiates](#)
[Economics](#)
- Source:** PsycINFO
- Full Text:** Available from *Wiley* in [Pain Practice](#)

145. Towards a crossmodal exploration of cognitive deficits in psychopathology.

- Citation:** Psychologica Belgica, 2014, vol./is. 54/3(282-297), 0033-2879 (2014)
- Author(s):** Maurage, Pierre; Campanella, Salvatore
- Correspondence Address:** Maurage, Pierre, pierre.maurage@uclouvain.be
- Institution:** Laboratory for Experimental Psychopathology, Psychological Sciences Research Institute, Universite catholique de Louvain, Louvain, Belgium; Laboratoire de Psychologie Medicale et d'Addictologie, ULB Neuroscience Institute, CHU Brugmann-Universite Libre de Bruxelles, Bruxelles, Belgium
- Language:** English

Abstract:	Face-voice integration has been extensively explored among healthy participants during the last decades. Nevertheless, while binding alterations constitute a core feature of many psychiatric diseases and have been thoroughly investigated in schizophrenia and autism, these crossmodal processes have been little explored in other psychiatric populations, and notably in addictions. As an illustration, alcohol-dependence is associated with a wide range of psychological, cognitive and cerebral consequences, among which affective disturbances hold a crucial position. Indeed, it has been shown during the last decade that alcohol-dependent individuals present important emotional impairments, particularly in the decoding of affective faces and voices. In view of the role they play in the development and maintenance of alcohol-dependence, it appears crucial to deepen the understanding of these deficits, and notably to determine their evolution in more ecological settings. Indeed, these decoding deficits have up to now been exclusively explored in unimodal studies (i.e. focusing on one sensorial modality) while in real life situations, emotional stimulations are most often multimodal. The central objective of the present paper is thus to present recent studies using an integrative approach combining behavioural, electrophysiological and neuroimaging techniques to explore the audiovisual integration of emotional stimuli in alcohol-dependence. These results, clearly showing that alcohol-dependence leads to altered crossmodal processing of affective faces and voices, constitute a first step towards a multidisciplinary exploration of crossmodal processing in psychiatry, extending to other stimulations, sensorial modalities and populations. Finally, the fundamental and clinical implications of this research perspective will also be underlined. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Country of Publication:	STATEMENT: This is an open-access article distributed under the terms of the Creative Commons Attribution 3.0 Unported License (CC-BY 3.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See http://creativecommons.org/licenses/by/3.0/ ; HOLDER: The Author(s); YEAR: 2014
Publication Type:	Journal; Peer Reviewed Journal
Subject Headings:	*Alcoholism *Cognitive Impairment *Psychopathology Clinical Practice Face Perception Neuroimaging Sensory Integration Speech Perception Voice
Source:	PsycINFO

146. Opioid use.

Citation:	Essential psychopathology casebook., 2014(508-527) (2014)
Author(s):	Varma, Anjali
Language:	English
Abstract:	(from the chapter) This chapter presents a case report of Kelli, a 33-year-old female social worker, who presents to the emergency room of a tertiary hospital reporting pain in her lower back. She is evaluated by the emergency department physician; physical examination shows some tenderness and tension in her lower back, and spine x-rays are relatively unremarkable. She receives an injection of ketorolac (a strong, non-narcotic anti-inflammatory and analgesic) and is referred to a primary care doctor. In three weeks she has her initial appointment with her new primary care doctor who thoroughly evaluates her condition and decides to give her hydrocodone 10 mg three times daily after she signs a pain agreement. During this meeting Kelli mentions having mood swings and is scheduled to see an outpatient psychiatrist. She is also scheduled for a follow-up appointment with primary care in six months. She calls twice for early refills of opioid pain relievers and once gives a urine drug screen showing benzodiazepines (not

prescribed for her), she is told that she is in violation of her pain contract and will no longer receive narcotics from the primary care doctor. Kelli is seen in the psychiatric outpatient clinic of a buprenorphine provider. She admits to using pain pills to get high. She knows about methadone clinics but never dared to go to one, as some of her clients used to go there. Kelli is accepted in the outpatient buprenorphine clinic of the psychiatrist after she signs a treatment agreement that details clinic guidelines. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Maintenance Therapy](#)
[*Opiates](#)
[*Outpatient Treatment](#)
 Human Females
 Pain
[Social Workers](#)

Source: PsycINFO

147. Cocaine use in adolescence.

Citation: Essential psychopathology casebook., 2014(499-507) (2014)

Author(s): Hartman, David W

Language: English

Abstract: (from the chapter) Presents a case report of Marie, a 16-year-old female, who is brought to the psychiatrist's office by her paternal grandparents. She presents with a serious cocaine addiction, which came as something of a surprise to her grandparents because although they knew that she had previously smoked marijuana, they were unaware of the cocaine abuse. Marie has been primarily raised by her father's parents, who are present during part of the psychiatric evaluation. When she was six years of age, Marie's parents divorced. Her mother, suffering from severe chronic back pain, had been mostly bedridden throughout Marie's childhood. She recalls returning home from kindergarten to find her mother lying on the couch watching TV. The house was always dirty and unkempt. There was never any food in the kitchen, and her mother showed little interest in what happened at school or in her personal life. Her father was described as an alcoholic who had many extramarital affairs. Marie remembers spending time with him rarely and says that he was always out late at night. On weekends, her father would often show up intoxicated. When the parents did spend time together, they frequently argued about her father seeing other women, her mother saying that he could never be trusted. Whenever her father did promise to spend time with Marie, he often did not show up. When the divorce occurred, it became apparent that Marie could no longer be cared for by her parents. The Department of Social Services got involved, as well as the courts, and her paternal grandparents were given custody as her legal guardians. She moved in with them. A comprehensive treatment plan is set up with Marie and, with her permission, her grandparents. She is to attend a semiweekly support group for adolescents in various stages of recovery, individual therapy with the clinician, and biweekly family sessions. She is also encouraged to attend some teenage 12-step meetings. She is begun on a low dose of bupropion and cautioned regarding concomitant use of cocaine. She is coached on proper sleep hygiene and is encouraged to begin a journal which she may or may not share with the therapist. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Adolescent Psychotherapy](#)
[*Cocaine](#)
[*Drug Abuse](#)
[*Drug Therapy](#)
[*Support Groups](#)
 Bupropion
 Child Custody
 Family Therapy

[Grandparents](#)
[Individual Psychotherapy](#)
[Twelve Step Programs](#)

Source: PsycINFO

148. Alcohol use.

Citation: Essential psychopathology casebook., 2014(490-498) (2014)

Author(s): Lehmann, Lauren

Language: English

Abstract: (from the chapter) This chapter presents a case report of Bennett, a 64-year-old man with a 48-year drinking history. He typically drinks in a pattern of four-day binges every two weeks, drinking 12 to 18 12-ounce beers each day during the binge. He has done so for the past eight years since he retired as a contractor; before his retirement he was drinking four beers daily. The recovery period following each drinking episode is increasing in duration and severity. He reports that he needs more alcohol to achieve the effect he desires and that he has tried unsuccessfully to decrease the quantity he consumes. He reports no history of drug use, blackouts, seizures, or delirium tremens. His last drink was eight hours ago, and he complains of tremulousness, anxiety, headache, mild nausea, and diaphoresis. Bennett's diagnosis of Alcohol Use Disorder falls into the severe range based on the number of criteria endorsed. Bennett's Clinical Institute Withdrawal Assessment of Alcohol Scale, Revised (CIWA-Ar) score on hospital admission is 12. He consents to a course of diazepam 20 mg every two hours with valproic acid 1,250 mg daily. He requires 40 mg diazepam over four hours before his repeated CIWA-Ar score is 6. The next day, prior to discharge with a five-day course of valproic acid and a continued decline in his CIWA-Ar score, he is willing to discuss the next steps in treatment. Having completed the acute detoxification phase of treatment, Bennett is now in a position to be approached by the treatment team to assess his readiness to change his behavior and his willingness to explore pharmacologic aids to assist him. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Alcoholism](#)
[*Diazepam](#)
[*Drug Therapy](#)
[*Hospital Admission](#)
[Detoxification](#)
[Severity \(Disorders\)](#)
[Valproic Acid](#)

Source: PsycINFO

149. Competency to stand trial.

Citation: Essential psychopathology casebook., 2014(475-481) (2014)

Author(s): Daum, Conrad H

Language: English

Abstract: (from the chapter) Presents a case report of a defendant, a 27-year-old African American male, Lamont, who was at a picnic area at a nearby park with his girlfriend and had consumed between them about 12 cans of beer. At the table next to them was a couple with their infant son. The infant's father was drinking beer while his wife was feeding the child baby food. A sudden gust of wind blew the heavily soiled bib onto the face of the defendant's girlfriend. The defendant became angry and confronted the father. An argument ensued and the defendant punched the victim, breaking his jaw. Lamont did not resist arrest when the park rangers came and charged both men with public intoxication. In addition, the defendant was charged with felony unlawful wounding. The defendant claimed no memory of the argument or the assault. This is the major reason for his attorney requesting the psychiatric evaluation, to explore a possible insanity defense. The

examination shows that he has "sufficient present ability to consult with his attorney with a reasonable degree of rational understanding and a rational as well as factual understanding of the proceedings against him." He presents with a capacity "to assist in preparing his defense." The conclusion is that he is competent to stand trial. The pathogenesis of Lamont's problems is a combination of family genetics, family milieu, poor impulse control, temper outbursts, and use of alcohol to cope with dysphoria. The diagnoses of bipolar disorder NOS with alcohol use disorder address the importance of treating the mental disorder and alcoholism concurrently. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Alcoholism](#)
[*Bipolar Disorder](#)
[*Competency to Stand Trial](#)

Source: PsycINFO

150. Bipolar disorder.

Citation: Essential psychopathology casebook., 2014(226-238) (2014)

Author(s): Kablinger, Anita

Language: English

Abstract: (from the chapter) Bipolar disorder is highly heritable, and first-degree relatives with diagnosed or likely bipolar disorder are a significant aid in diagnostic assessment of individuals with mood difficulties. Age of onset is usually in the early twenties, but the diagnosis of bipolar disorder in children is common (almost 7% in a community sample). The majority of these patients do not meet criteria for specific type I or II illnesses and often are placed in the "not otherwise specified" (NOS) category. In addition, bipolar disorder NOS and attention deficit hyperactivity disorder (ADHD) have multiple similarities and co-occur very frequently in this age group. It is rare for bipolar disorder to begin after the age of 60 and is more likely attributed to medical or neurological diseases as well as medication or substance use. This chapter presents the case of Brian, a self-referred 37-year-old man with no previous psychiatric hospitalizations who presents to the outpatient clinic for evaluation and treatment of mood swings. Brian has a positive family history of bipolar disorder as well as alcoholism, and he began having mood symptoms in his teens. He was given antidepressant medications by his primary care physician without benefit, likely due to a misdiagnosis of major depression. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Bipolar Disorder](#)
[*Drug Therapy](#)
[Alcoholism](#)
[Diagnosis](#)

Source: PsycINFO