Boletín bibliográfico
Estimado lector:

El siglo XX marcó a la humanidad por sus avances en ciencia y tecnología que nos permitieron conocer más a fondo las razones técnicas detrás de muchos comportamientos humanos. En este sentido el llegar a la conclusión que la adicción es una enfermedad ha sido un avance de carácter indispensable para poder brindar una atención debida a todas las personas que han caído en la desgracia de dicha enfermedad. El conocimiento fue en su momento el que desnudó la realidad que acontece a nivel fisiológico con el uso de drogas y de la misma forma sigue dejando en evidencia situaciones que antes solían ser tabú y que conocemos ahora tienen una manera técnica de ser atendidas. Este boletín es un medio de difusión del esfuerzo que en distintas partes del orbe realizan investigadores para poder tener un mejor entendimiento de la problemática que generan las drogas y la mejor forma en que la misma se puede atender. Le instamos a compartir esta información con sus conocidos y ser parte de esta herramienta compartiendo también los estudios por este medio que pudiesen estar ustedes realizando y donde como institución rectora en la materia que supone ser el ICD pudiésemos colaborar.
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Electroencephalographic and Convulsive Effects of Binge Doses of (+)-Methamphetamine, 5-methoxydiisopropyltryptamine, and (±)3,4-Methylenedioxymethamphetamine in Rats.

Abstract: The abuse of drugs such as methamphetamine (MA), 3,4-methylenedioxymethamphetamine (Ecstasy, MDMA), and 5-methoxydiisopropyltryptamine (5-MeO-DIPT; Foxy) is global. Symptoms from taking these drugs include tachycardia, agitation, hyperpyrexia, and sometimes seizures. We compared the EEG effects of these drugs in male Sprague-Dawley rats (~300 g) implanted with cortical electroencephalographic (EEG) electrodes prior to testing. Animals received four subcutaneous injections of MA, MDMA, or Foxy (10 mg/kg each as freebase, administered every 2 h), or saline as these doses produce lasting effects on learning, memory, and monoamines. EEG tracings were recorded before, during, and after treatment. Animals receiving MDMA showed no significant EEG abnormalities or myoclonus. MA treatment resulted in myoclonic activity and in brief (<10 s) EEG epileptiform activity in ~50% of the rats. Longer seizure activity (10 s to 5 min) was recorded in some MA-treated rats following the third and fourth doses. The onset of myoclonic activity following Foxy treatment occurred shortly after the first dose. All rats receiving Foxy showed seizures by the second dose and this continued throughout the treatment regimen. EEG abnormalities are observed after MA but not after MDMA binge dosing, which mimic the neurochemical changes seen in chronic users. While the neurochemical effects of Foxy are not known in humans, this drug causes severe EEG abnormalities and overt seizures in 100% of animals tested.

Understanding Automatic Behavior in Narcolepsy: New Insights Using a Phenomenological Approach

Abstract: Automatic behaviors are stereotyped, repetitive behaviors performed without awareness and are a common auxiliary symptom of narcolepsy (a disorder of excessive daytime sleepiness). The goal of the study was to expand our knowledge of this complex but poorly understood phenomenon. Here we present new insights based on an analysis of the experiences of ten individuals with narcolepsy. Procedures included two interviews, a family member interview, a one week journal and a one day journal when participants agreed to take minimal or no stimulant medication. Three different types of automatic behavior were identified; sleepiness with low cognitive load, sleepiness with high cognitive load and high cognitive load without sleepiness. Original contributions include: notion of cognitive load, possible progression of automatic behavior to sleep, a new classification of errors, importance of adequate medication, as well as a theoretical discussion.
Control over Drug Acquisition, Preparation, and Injection: Implications for HIV and HCV Risk among Young Female Injection Drug Users


Young female injection drug users (IDUs) are at risk for HIV/HCV, and initiating the use of a new drug may confer additional and unexpected risks. While gender differences in the social context of injection drug use have been identified, it is unknown whether those differences persist during the initiation of a new drug. This mixed-methods study examined the accounts of 30 young female IDUs in Los Angeles, CA, USA from 2004 to 2006, who described the social context of initiating injection drug use and initiating ketamine injection. The analysis aimed to understand how the social context of young women’s injection events contributes to HIV/HCV risk. Women’s initiation into ketamine injection occurred approximately 2 years after their first injection of any drug. Over that time, women experienced changes in some aspects of the social context of drug injection, including the size and composition of the using group. A significant proportion of women described injection events characterized by a lack of control over the acquisition, preparation, and injection of drugs, as well as reliance on friends and sexual partners. Findings suggest that lack of control over drug acquisition, preparation, and injection may elevate women’s risk; these phenomena should be considered as a behavioral risk factor when designing interventions.

Older Adults and Substance-Related Disorders: Trends and Associated Costs


Purpose. The aim of this study is to examine the changing service profile of older adults receiving substance abuse services over the past decade and the increased costs of treating this population.

Design and Methods. Medicaid claims for mental health and substance abuse services data from a medium sized county in an eastern state were analyzed for individuals aged 50 years and older in calendar year 2000 or 2009. Univariate statistics are presented to describe the substance abuse and mental health services used by older adults in these two years.

Results. The number of low-income older adults who accessed services for treatment and who had a substance-related diagnosis grew from 545 individuals in 2000 to 1,653 individuals in 2009. Costs for services utilized by older adults with a substance-related diagnosis rose by 358% from $2.1 million in 2000 to $9.5 million in 2009.

Implications. The increase in the number of low-income older adults with a substance-related disorder and the concomitant rise in total spending for Medicaid reimbursed services indicate that local and state social service providers need to prepare for an older adult population who will need appropriate substance abuse prevention and treatment programs.
A Lifespan Developmental-Stage Approach to Tobacco and Other Drug Abuse Prevention


At least by informal design, tobacco and other drug abuse prevention programs are tailored to human developmental stage. However, few papers have been written to examine how programming has been formulated as a function of developmental stage throughout the lifespan. In this paper, I briefly define lifespan development, how it pertains to etiology of tobacco and other drug use, and how prevention programming might be constructed by five developmental stages: (a) young child, (b) older child, (c) young teen, (d) older teen, and (e) adult (emerging, young-to-middle and older adult sub stages). A search of the literature on tobacco and other drug abuse prevention by developmental stage was conducted, and multiple examples of programs are provided for each stage. A total of 34 programs are described as examples of each stage (five-young children, 12-older children, eight-young teens, four-older teens, and five-adults). Implications for future program development research are stated. In particular, I suggest that programming continue to be developed for all stages in the lifespan, as opposed to focusing on a single stage and that developmentally appropriate features continues to be pursued to maximize program impact.

The Choice of Screening Instrument Matters: The Case of Problematic Cannabis Use Screening in Spanish Population of Adolescents


The aim of this study was to examine the feasibility of problem cannabis use screening instruments administration within wide school surveys, their psychometric properties, overlaps, and relationships with other variables. Students from 7 Spanish regions, aged 14–18, who attended secondary schools were sampled by two-stage cluster sampling (net sample 14,589). Standardized, anonymous questionnaire including DSM-IV cannabis abuse criteria, Cannabis Abuse Screening Test (CAST), and Severity of Dependence Scale (SDS) was self-completed with paper and pencil in the selected classrooms. Data was analyzed using classical psychometric theory, bi variate tests, and multinomial logistic regression analysis. Not responding to instruments’ items (10.5–12.3%) was associated with reporting less frequent cannabis use. The instruments overlapped partially, with 16.1% of positives being positive on all three. SDS was more likely to identify younger users with lower frequency of use who thought habitual cannabis use posed a considerable problem. CAST positivity was associated with frequent cannabis use and related problems. It is feasible to use short psychometric scales in wide school surveys, but one must carefully choose the screening instrument, as different instruments identify different groups of users. These may correspond to different types of problematic cannabis use; however, measurement bias seems to play a role too.
Male adolescent substance use disorder and attention-deficit Hyperactivity Disorder: A Review of the Literature


Approximately, one-third of male adolescents in treatment for a substance use disorder (SUD) also have an Attention-Deficit Hyperactivity Disorder (ADHD). This strongly suggests that ADHD is a major risk factor for the development of SUD which practitioners must address if they are to provide adequate treatment for adolescents with SUD/ADHD. This paper supports a causal role for ADHD in the development of SUD and examines the developmental mechanisms whereby ADHD increases risk for SUD. These mechanisms include increased risk for conduct disorder, academic failure, deviant peer affiliation, engaging in risk behaviors, and self-medication. Assessment and treatment recommendations for those comorbid for SUD/ADHD are provided.

Juicios morales en drogodependencias


Introducción. El juicio moral es un constructo relevante para la comprensión de las adicciones por implicar la integración de procesos cognitivos y emocionales y por su repercusión sobre la conducta social y legal de los consumidores.

Objetivo. Investigar los juicios morales de policonsumidores de sustancias que siguen tratamiento en una comunidad terapéutica.

Material y métodos. Participaron 32 varones policonsumidores de sustancias y 32 no consumidores que completaron la versión española de la batería de dilemas morales de Moore.

Resultados. Los resultados mostraron que los juicios morales de los policonsumidores difieren significativamente del grupo no consumidor, siguiendo un patrón utilitarista en el que se asume una conducta emocionalmente aversiva en favor de un beneficio mayor (por ejemplo, matar a una persona para salvar un mayor número de vidas).

Conclusiones. Este hallazgo sugiere la existencia de una alteración en la toma de decisiones morales en la población de policonsumidores, que podría estar relacionada con los problemas psicosociales y legales (tráfico de drogas, robo, etc.) que se asocian a esta población.

PALABRAS CLAVE Juicio moral; Toma de decisiones morales; Patrón utilitarista; Policonsumo
Medida de la eficiencia técnica de programas de tratamiento con opiáceos: utilidad del modelo Data Envelopment Analysis (DEA)


Objetivo. Valorar la utilidad del modelo matemático Data Envelopment Analysis (DEA) para medir la eficiencia de programas de tratamiento con opiáceos (PTO).

Material y métodos. Se realiza un estudio de “simulación”, es decir, se parte de un conjunto de supuestos y se manejan datos no reales pero fundamentados en la literatura. Se comparan 15 hipotéticos PTO y se mide la eficiencia de cada uno de ellos. De cada programa habríamos obtenido información sobre seis variables, tres de las cuales serían consideradas como indicadores de input (ratio terapeuta/paciente, unidades asistenciales en drogodependencias y porcentaje de pacientes con dosis adecuadas) y tres de output (días de abstinencia de heroína en el último mes, tasas de retención y grado de mejoría de los problemas relacionados con el consumo). La matriz de datos generada se somete a análisis mediante el DEA.

Resultados. El modelo ordena los programas en función de su nivel de eficiencia. Los programas P8, P9, P11, P5 y P6 son considerados “ineficientes” y se estiman las magnitudes de las variables de input y output que distan de un rendimiento óptimo. En este análisis, la variable de output que añade más eficiencia a los programas es el “número de días de abstinencia de heroína en el último mes” y la variable de input que añade más ineficiencia a los mismos, es el “porcentaje de pacientes con dosis adecuadas”.

Conclusión. El modelo DEA tiene una utilidad potencial para la medida comparativa de la eficiencia de PTO. La información aportada por este modelo podría ser utilizada por los coordinadores de programas para introducir cambios en los procesos terapéuticos con el objetivo de mejorar la calidad asistencial.

Palabras clave Buprenorfina; Programas; Eficiencia; Medida

Deficits of affect mentalization in patients with drug addiction: Theoretical and Clinical Aspects


Traditionally treated with wariness, drug addictions have provoked a serious interest in psychodynamically oriented clinicians in recent decades. This paper discusses the development of contemporary psychodynamic conceptualizations of addictions, focusing specifically on mentalization-based theories. The concept of mentalization refers to a complex form of self-regulation which includes attribution of psychological meaning to one’s own behavior and affective states, as well as those of the others. We hypothesize that drug-addicted patients have severe impairments in mentalizing, associated with developmental deficits, characteristic for the borderline personality disorder and psychosomatic conditions. Psychodynamic models of mentalization and their corresponding research operationalizations are reviewed, and implications for a contemporary understanding of drug addictions and psychotherapy are drawn. The authors propose that mentalization-oriented theories provide an adequate conceptualization, which is open to empirical testing and has clear and pragmatic guidelines for treatment.
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