Clinical Trials Network

CTN Bulletin
October 30, 2008
Volume 08 – 18

Trial Progress – Over 9,000!
Trial enrollment is taken from the official Trial Progress Report prepared by the Data and Statistics Center (DCRI) each month. These enrollment numbers reflect information in the database through September 30, 2008.

Open Studies (5)
- CTN 0027 – Randomized 879
- CTN 0027A (Genetics) – Randomized 483
- CTN 0030 – Randomized 611
- CTN 0031 – Randomized 79
- CTN 0031A – Randomized 48
Total Randomized All Studies: 9,345

New Study – CTN 0044
Web-Delivery of Evidence-Based, Psychosocial Treatment for Substance Use Disorders
The purpose of this study is to evaluate the effectiveness of adding an interactive, web-based version of the Community Reinforcement Approach (CRA) intervention plus abstinence incentives as an adjunct to community-based, outpatient substance abuse treatment. The trial will randomize individuals entering outpatient treatment for substance use disorders to receive 24 weeks of either: (1) Treatment as Usual (TAU), reflecting standard treatment at the outpatient programs in which participants are enrolled, or (2) TAU plus the Therapeutic Education System (TES), a computerized psychosocial intervention with incentives targeting abstinence from one’s primary drug of abuse. The primary outcome measure is drug abstinence, and the study will also evaluate if improved outcomes are maintained at 3 and 6 months post-intervention. Additionally, the study will perform a comprehensive economic analysis of adding TES to TAU. Please contact Udi Ghitza at (301) 443-9983, e-mail ghitzau@nida.nih.gov, or Michele Straus at (301) 443-8888, e-mail mstraus@nida.nih.gov with any questions.

CTN 0030 (POATS) – Recruitment Ends!
The recruitment goal has been reached in Prescription Opiate Addiction Treatment Study (POATS)! The trial achieved its Phase 1 recruitment target of 648! The Lead Node thanks all the team members for their hard work and dedication. Follow up activities will continue at all the sites. Congratulations!

The CTN Bulletin is Now Searchable at the CTN Dissemination Library!
Ever wished you could quickly find an article or announcement you remember seeing in a past issue of the CTN Bulletin? Now you can! The CTN Dissemination Library has been indexing past issues of the Bulletin (2006 to present) and making them searchable from the Dissemination Library web site: http://ctndisseminationlibrary.org/ctnbulletin.htm.

You can search by keyword, node, CTP, protocol name or number, and/or year and quickly view a list of matching Bulletin articles. Click on the article title to read the full text, and from there you can also download a PDF of the entire issue.

We’ve also made some changes to the CTN Dissemination Library home page (http://ctndisseminationlibrary.org). The “Quick Search” box has been moved to a more prominent position, and we’ve added a new section of “Related Resources,” which includes the CTN Public Data Share web site, the CTN Bulletin search page, and a page of Implementation Resources for Clinicians.

If you have any questions or comments about the CTN Dissemination Library, please don’t hesitate to ask! E-mail the CTN Dissemination Library at info@ctndisseminationlibrary.org.

CTN Data Share Web Site
The de-identified data for CTN 0019 (HIV/STD Risk Reduction in Women) are now available on the CTN data share web site and can be accessed at: http://www.ctndatashare.org. This is the second CTN HIV clinical trial to have data posted to the data share site. Look for new changes to the data share site, including a cross reference of Case Report Forms (CRFs) for all the posted data sets. Contact Carol Cushing or Paul Wakim if you have any questions about CTN data share.

Daylight Savings Time Ends!
Reminder - Daylight Savings Time ends Sunday, November 2. Turn your clocks back 1 hour on Saturday night, November 1.

Federal Offices Closed
The CCTN office and NIDA will be closed on Tuesday, November 11, 2008, for the Veterans Day holiday observance.

CTN is a program of the National Institute on Drug Abuse, part of the National Institutes of Health within the Department of Health and Human Services.
Publications Committee

A paper entitled "Disparities in health services for HIV/AIDS, Hepatitis C virus, and sexually transmitted infections: role of substance abuse treatment programs" from the CTN 0012 Infectious Diseases protocol has been accepted for publication in the Journal of Addiction Medicine. This is the fifth paper from that study to be accepted for publication by the Journal of Addiction Medicine. The lead author is Lawrence S. Brown, Jr., MD, MPH, FASAM of Addiction Research and Treatment Corporation, who was national lead investigator. Co-authors are: Steven Kritz, MD, Adashima Muhammad, MPH, Edmund J. Bini, MD, MPH, R. Jeffrey Goldsmith, MD, Jim Robinson, MEd, Donald Alderson, MS, Deborah S Hasin, PhD, and John Rotrosen, MD.

A paper entitled "Facilitating outpatient treatment entry following detoxification for injection drug use: A multi-site test of three interventions" from the CTN 0017 HIV/HCV Risk Reduction protocol has been accepted for publication in Psychology of Addictive Behaviors. Barbara Campbell of the Oregon/Hawaii Node is the lead author.

Other CTN papers recently accepted for publication are:

Multi-study CTN 0004/0005/0006/0007: “Serious adverse events in randomized psychosocial treatment studies: safety or arbitrary edicts?” Nancy Petry et al; Journal of Consulting and Clinical Psychology.

CTN 0001/0002 “Predictors of outcome for short-term medically supervised opioid withdrawal during a randomized, multicenter trial of buprenorphine/naloxone and clonidine in the NIDA Clinical Trials Network.” Douglas Ziedonis et al; Drug and Alcohol Dependence.

A paper entitled "Assessment and treatment of co-occurring eating disorders in publicly funded addiction treatment programs" has been published in Psychiatric Services, Sept 2008, 59:1056-59. It relies on non-CTN-data but is a product of the CTN’s Gender Special Interest Group (SIG). Sue Gordon of the Delaware Valley Node is the lead author. Congratulations to Sue and to the entire Gender SIG! An abstract for this article can be found at the end of the Bulletin.

Louise Haynes, Donald Calsyn, and Susan Tross recently published an article entitled "Addressing sexual issues" in Counselor magazine. It appeared in the August 2008 issue and discusses the need for addressing, and how to address, sexual behavior issues related to drug use and addiction -- issues that were addressed in CTN studies 0018 and 0019, HIV/ Sexual Risk Reduction for Men and Women.

The primary outcome paper from CTN019 (HIV/STD Risk Reduction in Women) has been published in the Journal of Acquired Immune Deficiency Syndrome, Aug 2008, 48(5): 581-589. Susan Tross was the lead investigator and the lead author on the report. On indices of unprotected sexual occasions the study found a statistically significant (p<0.0001) interaction between treatment group and time which is interpreted as supporting the benefits of the more intensive safer sex skills building (SSB) approach over the briefer health education (HE) approach. An abstract for this article can be found at the end of the Bulletin.

The primary outcome paper from study CTN 0003 (Buprenorphine Taper Schedule) has been accepted for publication in Addiction, one of the leading journals in the addictions field. The paper is entitled "Buprenorphine Tapering Schedule and Illicit Opioid Use.” Walter Ling is the lead author and the lead investigator. The study compared 7-day versus 28-day buprenorphine tapers and found that the shorter taper was significantly superior in terms of the percent of patients providing an opioid-free urine sample at the end of the taper, but that at 1 month post-taper the percent of patients providing an opioid-free urine sample was equivalent -- 18% -- regardless of the taper duration.

Congratulations to all the authors and study teams!

CTN-0030 Follow-Up Study Is Moving Forward

An extension to the CTN 0030 follow-up period is moving forward in order to examine long-term outcomes for individuals dependent on opioid analgesics (OA). The project will extend the follow-up period by three years from study randomization. This provides an opportunity to better understand the long-term course of OA dependence in a sample of well-characterized treatment-seeking individuals. The project objectives are to describe the substance use trajectories of participants and to identify factors associated with long-term recovery from OA dependence. This exploratory, naturalistic study will help guide future treatment research on OA dependence. Planning meetings were held at the October Steering Committee meeting to discuss logistics and study design.

Topics for CTN Articles in NIDA Notes
Please forward ideas for CTN related articles to Jeff Selzer (Long Island Node) at selzer@lij.edu.
**CTN 0032 Update**

The HIV Rapid Testing & Counseling (CTN 0032) protocol Electronic Message Board is up and running! Scheduling of counselor booster trainings and site initiation visits are underway. As a reminder, please send nominations for the “CTN 0032 Star of the Month” to the Lead Investigator, Dr. Lisa Metsch, at LMetsch@med.miami.edu by October 31, 2008.

**Florida Node News**

The National Hispanic Science Network (NHSN) on Drug Abuse, chaired by José Szapocznik, Ph.D., Florida Node Principal Investigator, held its eighth annual conference, “Community, Behavioral and Molecular Sciences in Addictive Disorders,” from October 1-3 in Bethesda, Maryland. The conference was an outstanding success, with over 220 participants from ten countries, and addressed vital issues of Latino drug use research.

Dr. Nora Volkow, Director of the National Institute on Drug Abuse (NIDA), presented the conference’s keynote address on “Imaging Obesity and Addiction,” which examined the common effects on the brain’s dopaminergic system and executive functioning that occur in obesity and addiction.

The 2008 NHSN Conference also featured several special interest break-out sessions, as well as mentoring and training activities to improve grant writing skills and overall scientific productivity. New to this conference was a breakout session on Research Priorities and Funding Opportunities with NIDA, and a presentation by the National Institutes of Health Office of Intramural Training and Education.

Two exciting international initiatives of the NHSN were also brought together at the conference. The first was the RED Latino Americana de Investigadores en Drogas (REDLA), an epidemiology network of eight countries conducting coordinated epidemiological research on drug abuse and bringing governments and within country scientists together. RE DL A was created by the NHSN partnership with the Organization of American States and NIDA. The second, the Central American Research Network on Addictions, known as RECIA, for its initials in Spanish, was created in partnership with the United Nations Office of Drug and Crime, NIDA and the U.S. State Department to assist Central American countries developing a research infrastructure to improve their drug abuse treatment programs. Representing the Florida Node, in addition to Dr. Szapocznik, was Dr. Viviana Horigian, who presented on the CTN and the various protocols that have been implemented and are currently underway.

The NHSN conference proved to be an outstanding opportunity to meet and network with scientists based in the U.S. and the Spanish speaking world. The conference location in Bethesda also enabled interaction between NIH scientists and scientists from throughout the Spanish Speaking world.

**Grants Tidbit Corner – New Grants**

The following research opportunities may be of interest to CTNers:

- **Behavioral Pharmacology and Genetics: Translating and Targeting Individual Differences (R03) (RFA-DA-09-016)**
  

- **Bio-signatures of Chronic Drug Exposure (R21) (RFA-DA-09-022)**
  

- **Drug Abuse Epidemiology and Services Research in Cooperation with the Clinical and Translational Science Awards Consortium (R01)(PAS-09-001)**
  

- **Health Services Research on the Prevention and Treatment of Drug and Alcohol Abuse (R01) (PA-08-263)**
  

- **Health Services Research on the Prevention and Treatment of Drug and Alcohol Abuse (R21) (PA-08-264)**
  

- **Health Services Research on the Prevention and Treatment of Drug and Alcohol Abuse (R03)(PA-08-265)**
  

**Delaware Valley Update**

Dr. George Woody (Delaware Valley Node PI) gave a presentation on "Addiction and Its Treatment: Much Progress, More To Do" at a meeting entitled “Technologies of the 21st Century: Biological, Physical, Informational and Social Aspects.” The occasion was the 2nd St. Petersburg Humboldt-Kolleg Conference in St. Petersburg, Russia. Congratulations!
Publications Committee Report to the SC

At the recent Steering Committee (SC) meeting in October, the Publications Committee reported the following recent publications activity. The items in bold are the primary outcome papers for those studies.

**Recent CTN Publications**

- **Gender SIG**  
  Assessment of eating disorders
- **0004/0005**  
  MI/MET therapist adherence & skill
- **0004/0005**  
  Teaching MI/MET supervision
- **0007**  
  Infrequent illicit methadone use
- **0030**  
  Training via a “standardized patient”

**Acceptances for Publications**

- **0001/0002**  
  Predictors of withdrawal outcome
- **0004-0007**  
  SAEs in psychosocial trials
- **0004/0005**  
  What is treatment-as-usual?
- **0008**  
  Attitudes toward medication use
- **0010**  
  Opioid vs non-opioid user adolescents
- **0012**  
  Disparities in infectious disease services
- **0012**  
  Opinions on infectious disease service delivery
- **0017**  
  Facilitating post-detox treatment entry
- **0019**  
  Sexual risk reduction for women

**Other Recent PC Reviews**

- **0003**  
  Buprenorphine taper speed
- **0009**  
  Depression x smoking cessation
- **0010**  
  Buprenorphine response x race/ethnicity
- **0010**  
  Buprenorphine Nx liver function
- **0014**  
  AE guidelines for family therapy
- **0014**  
  BSFT engagement and retention
- **0015**  
  Therapeutic alliance x outcome
- **0016**  
  Patient-therapist racial matching
- **0021**  
  Spanish MET

---

American Indian/Alaskan Native Workshop Update

The CTN Nodes collaborating to implement protocol CTN 0033-Ot (Methamphetamine and Other Drug Use among American Indians and Alaska Natives – MOD), along with NIDA CCTN staff, planned and hosted a workshop on October 21, 2008, prior to the CTN Steering Committee Meeting. The program was entitled “Conducting Research with American Indian/Alaska Native Communities in the CTN: Challenges, Opportunities and Collaborations.” Almost 100 individuals from American Indian tribes and Alaska Native communities, the Clinical Trials Network, NIH Institutes and Centers, the Centers for Disease Control and Prevention, and the Indian Health Service attended the workshop and participated in the discussion. William Lambert summarized the workshop at the CTN Steering Committee meeting the next day.

Wilbur Woodis from the Office of Minority Health in the Department of Health and Human Services opened with a short prayer. Tom and Alison Ball gave a keynote address that examined the history of research in Indian Country and advocated for transitioning Tribal Based Participatory Research into Indigenous Research – research conducted by and for tribes and their members.

The first workshop panel (Engaging AI/AN Communities to Collaborate in Research) extended the keynote conversation. Beverly Pigman described how the Navajo use the Institutional Review Board approval and monitoring processes to improve the quality of research and to enhance the accountability of the investigators and their research for the benefit of the Navajo Nation. Terryl Blue-White Eyes and Birdie Wermy reflected on their work in Indian Country and the need to be responsive to the unique needs of each community.

The second panel discussion included Kevin Foley, Bill Lambert, Maurine Orwa and Robin Sigo. This group examined the “Development and Implementation of a Tribal Based Participatory Research Process.” In the last panel, Dennis Donovan, Adeloa Jaiyeola, Duane Mackey, and Sandra Radin addressed the role of the investigator and his/her “Commitment and Responsibility to Tribal and Community Partners.” Panelists drew on their experiences to promote the expectation that investigators working with American Indian and Alaska Native communities have responsibilities to assure that the research they conduct is of value to the communities who participate in the studies.

Spring 2009 CTN Steering Committee

The spring 2009 Steering Committee Meeting will be held in Bethesda, Maryland, from March 24-26, 2009. More information, including registration, agendas, and logistics, will be posted starting January 19, 2009 at [www.sei2003.com/NIDA/CTN/Meetings](http://www.sei2003.com/NIDA/CTN/Meetings). For program information, please contact Ron Dobkins, M.A., at (301) 451-9575.
CTN Dissemination Library Update

Five articles were added to the CTN Dissemination Library in recent weeks:

- **Informal Discussions in Substance Abuse Treatment** by Martino, Ball, Nich, et al. *Journal of Substance Abuse Treatment* (2008 in press). This article evaluates the extent to which counselors initiated informal “chat” discussions with their clients during treatment sessions within CTN 0004 (MET) and CTN 0005 (MI).

- **Opioid Treatment Programs in the Clinical Trials Network: Representativeness and Buprenorphine Adoption** by Ducharme & Roman. *Journal of Substance Abuse Treatment* (2008 in press). Using data obtained from opioid treatment programs within the CTN and a sample drawn from other U.S. programs, this CTN-platform study compares the two groups on their characteristic, as well as their adoption of buprenorphine.

- **Quantifying Data Quality for Clinical Trials Using Electronic Data Capture** by Nahm, Pieper, & Cunningham. *PLoS ONE* 2008;3(8):e3049. This paper is an analysis of the source-to-database error rate found in data from the first year of the CTN’s use of electronic data capture, finding that rate to be significantly lower than the average of published error rates for other source-to-database audits.

- **Facilitating Outpatient Treatment Entry Following Detoxification for Injection Drug Use: A Multi-Site Test of Three Interventions** by Campbell, Fuller, Lee, Tillotson, et al. *Psychology of Addictive Behaviors* (2008 in press). This article describes the outcomes of CTN 0017, which tested three interventions to enhance treatment initiation following detoxification (single-session therapeutic alliance intervention, 2-session HIV/HCV risk reduction intervention, and treatment as usual only).


Find out what else is new at our [What’s New page](#), and add your own posters, presentations, and articles.

---

SAMHSA Awards to Three CTPs

Three CTN-affiliated CTPs have just been named recipients of the 2008 SAMHSA (Substance Abuse and Mental Health Services Administration) Science and Service Awards: Maryhaven in the Ohio Valley Node, Residence XII in the Pacific Northwest Node, and Western Psychiatric Institute and Clinic – Addiction Medicine Services in the Appalachian Tri-State Node. ([http://www.samhsa.gov/scienceandservice/currentWinners.aspx](http://www.samhsa.gov/scienceandservice/currentWinners.aspx)). There were only 5 recipients in each of the two categories in which the CTPs were included. As Sharon Chambers, MSW, Director of Residence XII stated, “Obviously, we would not have been in a position to do this without our participation in the CTN and the Women and Trauma Project.” Congratulations all!

---

Clinical Coordinating Center (CCC) at EMMES

**Welcome New Team Member!** – Please join the CCC in welcoming our new Administrative Coordinator, [Marsha Kremzier](mailto:kmkremzier@emmes.com). Marsha has been working at EMMES on another project for the last 3 months and has been working with the CTN team for about a month learning the ropes. She came to us from Quintiles and has experience in a variety of commercial, clinical research and other companies. Marsha will be assisting with supplies and drug ordering as well as site visit confirmation notifications and monitoring reports. Marsha can be reached via [ctnsupplies@emmes.com](mailto:ctnsupplies@emmes.com) as well as 301-251-1161 ext. 191. We are happy to have her on board.

Also, the CCC is happy to report that [Natasha Arocho](mailto:natasha.arocho@emmes.com), our former Administrative Coordinator for the past year, will now be out in the field in her new capacity as Protocol Monitor. Natasha has previously worked at the NIH as a medical writer/editor and has skill and expertise in writing and editing journal manuscripts, abstracts, graphs, presentations and other research reporting tools. She is well known at the CCC on certain protocols due to her past assistance with regulatory documents, supply ordering and general problem solving. Natasha will be focusing her efforts on the CTN 0031 and CTN 0032 studies. We are excited to increase Natasha’s responsibilities within the CCC structure; she has much to offer the CTN from her current and past experience.

**Training** – GCP Overview was the final seminar for the 2008 CTN Web Seminar Series. The session was attended by 29 CTN members across 11 nodes. The CCC would like to thank Anthony Floyd, Lynn Kunkel, Jennifer Sharpe Potter, and Katharina Weist for collaborating with the CCC and sharing their ([cont’d page 6](#))
experience and expertise in the 2008 Web Seminar Series. All presentations and handout material will be made available on LiveLink soon. Our 2009 series is under development. CTN members may send topic recommendations to ctntraining@emmes.com.

**What is an expedited review?**

An expedited review is a procedure through which certain kinds of research may be reviewed and approved without convening a meeting of the IRB. The Agency’s IRB regulations [21 CFR 56.110] permit, but do not require, an IRB to review certain categories of research through an expedited procedure if the research involves no more than minimal risk. A list of categories was last published in the Federal Register on January 27, 1981 [46 FR 8980]. The IRB may also use the expedited review procedure to review minor changes in previously approved research during the period covered by the original approval. Under an expedited review procedure, review of research may be carried out by the IRB chairperson or by one or more experienced members of the IRB designated by the chairperson. The reviewer(s) may exercise all the authorities of the IRB, except disapproval. If the person conducting the expedited review has an issue with what has been submitted, he/she may choose to bring the submission to the full IRB group at their next regularly scheduled meeting. Research may only be disapproved following review by the full committee. Sometimes the expedited review process is expected to be faster than the normal board review process and this may be the case, but is not always especially if the expedited reviewer feels it needs the full board review. The IRB is required to adopt a method of keeping all members advised of research studies that have been approved by expedited review.

*Other CCC related questions and topics*- Bob Lindblad at 301-251-1161, rlindblad@emmes.com, ctnsupport@emmes.com for laboratory and/or medication supplies, and ctnsafety@emmes.com for safety related issues/adverse event follow-up.

*NIDA Project Officer – Steve Sparenborg at (301) 496-4844, sparenborgs@nida.nih.gov.*

**Data and Statistics Center (DSC) at DCRI**

*Help Yourself…* Did you know you can get InForm password help yourself, at any time day or night?

When you are issued a new account by the EDC Help Desk to access any InForm protocol, you have an opportunity to create a challenge question and answer through the InForm change password screen. When you create a challenge question and enter your e-mail address, the information is permanently saved in the InForm system. If you have trouble remembering your password later on, you can use the hyperlink “Forgot Your Password?” to have your password automatically e-mailed to you any time, day or night.

We all have a lot to remember these days. Most of us use multiple systems that require unique passwords. Help yourself by keeping your InForm and CRIS passwords in sync. You can change your password in the InForm system at any time by clicking on the snowflake in the upper left corner of any InForm home page. You can also change your CRIS password by selecting “Change Password” on the top right side of the CRIS home page.

**Who to Contact:**

You may contact the Site Support Help Desk at 1-888-DSC-SSHD (1-888-372-7743) from 8:00 a.m. to 8:00 p.m. Monday through Friday or send an e-mail to: nidadsc-help@mc.duke.edu.

**Data Management Lead:**

Lori Poole, B.A., Phone (919) 668-8238
lori.poole@dcri.duke.edu

**Lead Statistician:**

Jeff Leimberger, Ph.D., Phone (919) 668-8758
leimb001@deri.duke.edu

**NIDA Project Officer, Carol Cushing, at:** ccushing@nida.nih.gov, telephone (301) 443-9815.

**Sites to Remember**

Here are some useful CTN and federal sites for reference:

- **CTN Data Share** – download public data sets, study information at www.ctndatashare.org.
- **Good Clinical Practice** training is available on-line for all CTN members at www.nihtraining.com/ctn.
- **Federal Per Diem Rates and GSA Forms** at http://www.gsa.gov/Portal/gsa/ep/home.do?tabId=0.
- **CRISP Data Base** is a searchable database of federally funded research projects. http://crisp.cit.nih.gov/.
- **CTN brochures, directories, conference calls from Synergy Enterprises Inc. (SEI) are available at CTNSupport@sei2003.com.**
Reminder to Grantees

All grantees must acknowledge funding received from the National Institute on Drug Abuse at the National Institutes of Health when issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects funded in whole or in part by NIDA funding. In addition, advance notice should be given to NIDA that research findings are about to be published so that NIDA may coordinate accurate and timely release to the media. Any press notification should be coordinated with the NIDA Press Officer at (301) 443-6245.

Updates for this Bulletin should be sent to Carol Cushing at: ccushing@nida.nih.gov

Abstract


CONTEXT: Because drug-involved women are among the fastest growing groups with AIDS, sexual risk reduction intervention for them is a public health imperative.

OBJECTIVE: To test effectiveness of HIV/STD safer sex skills building (SSB) groups for women in community drug treatment.

DESIGN: Randomized trial of SSB versus standard HIV/STD Education (HE); assessments at baseline, 3 and 6 months.

PARTICIPANTS: Women recruited from 12 methadone or psychosocial treatment programs in Clinical Trials Network of National Institute on Drug Abuse. Five hundred fifteen women with >or=1 unprotected vaginal or anal sex occasion (USO) with a male partner in the past 6 months were randomized.

INTERVENTIONS: In SSB, five 90-minute groups used problem solving and skills rehearsal to increase HIV/STD risk awareness, condom use, and partner negotiation skills. In HE, one 60-minute group covered HIV/STD disease, testing, treatment, and prevention information.

MAIN OUTCOME: Number of USOs at follow-up.

RESULTS: A significant difference in mean USOs was obtained between SSB and HE over time (F = 67.2, P < 0.0001). At 3 months, significant decrements were observed in both conditions. At 6 months, SSB maintained the decrease and HE returned to baseline (P < 0.0377). Women in SSB had 29% fewer USOs than those in HE.

CONCLUSIONS: Skills building interventions can produce ongoing sexual risk reduction in women in community drug treatment.


OBJECTIVE: Publicly funded addiction treatment programs were surveyed to increase understanding of treatment options for persons with co-occurring eating and substance use disorders.

METHODS: Data were collected between 2002 and 2004 from face-to-face interviews with program directors of a nationally representative sample of 351 addiction treatment programs.

RESULTS: Half of the programs screen patients for eating disorders; 29% admit all persons with eating disorders, and 48% admit persons with eating disorders of low severity. Few programs attempt to treat eating disorders. Programs that admit and treat patients with eating disorders are more likely to emphasize a medical-psychiatric model of addiction, use psychiatric medications, admit patients with other psychiatric disorders, and have a lower caseload of African-American patients.

CONCLUSIONS: Generally, patients with co-occurring eating and substance use disorders do not appear to receive structured assessment or treatment for eating disorders in addiction treatment programs. These results highlight the need for education of addiction treatment professionals in assessment of eating disorders.