

## **Flavored alcoholic beverages: An international marketing campaign that targets youth.**

Mosher JF; Johnsson D. *Journal of Public Health Policy* 26(3): 326-342, 2005. (37 refs.)

Flavored alcoholic beverages (FABs) were first introduced into the alcohol market in the early 1980s in the form of wine coolers. FABs are sweet, relatively low alcohol content beverages that are designed for "entry-level" drinkers. The alcohol industry has introduced new products and production methods to expand the category's popularity. Research suggests that they are popular with underage drinkers, particularly teenage girls, and that the industry uses marketing practices that appear to target youth. FABs are now marketed globally, and their production and marketing vary by country based on national regulatory restraints. In the United States, industry representations that the products are malt beverages for regulatory purposes appears to violate many state laws because the alcohol in the FABs is derived from distilled spirits. Recommendations for regulatory reform, including new legal definitions of FABs, increased taxes, and restrictions on availability, are applicable at both national and state levels. Copyright 2005, Palgrave Publishers Ltd.

## **An exploratory study examining the spatial dynamics of illicit drug availability and rates of drug use.**

Freisthler B; Gruenewald PJ; Johnson FW; Treno AJ; Lascala EA. *Journal of Drug Education* 35(1): 15-27, 2005. (16 refs.)

This study examines the spatial relationship between drug availability and rates of drug use in neighborhood areas. Responses from 16,083 individuals, were analyzed at the zip code level (n = 158) and analyses were conducted separately for youth and adults using spatial regression techniques. The dependent variable is the percentage of respondents using drugs in the past year. Neighborhood drug availability (the major independent variable) was measured by the percentage of non-drug users who had been approached to purchase drugs. Data were obtained as part of the Fighting Back community evaluation. For youth (aged 12 to 18), drug sales in adjacent and surrounding areas were positively associated with self-reported drug use in areas where youth were residents. For adults, drug

sales within the neighborhood were negatively associated with drug use, while drug sales in immediately adjacent neighborhoods were positively related to self-reports of drug use. Findings suggest that the areas where rates of drug users are greatest are not necessarily the same area where drugs are sold. Designing strategies to reduce the supply of drugs should receive input from city and regional planners and developers, as well as law enforcement and public health professionals. Copyright 2005, Baywood Publishing Co., Inc.

## **Psychostimulant treatment and risk for substance abuse among young adults with a history of attention-deficit/hyperactivity disorder: A population-based, birth cohort study.**

Katusic SK; Barbaresi WJ; Colligan RC; Weaver AL; Leibson CL; Jacobsen SJ. *Journal of Child & Adolescent Psychopharmacology* 15(5): 764-776, 2005. (43 refs.)

Objective: The aim of this study was to evaluate the association between stimulant treatment and the risk for substance abuse among young adults with a childhood diagnosis of attention-deficit/hyperactivity disorder (ADHD). Methods: Subjects included 295 research-identified ADHD incidence cases treated with psychostimulant medication and 84 ADHD cases not treated with psychostimulants. These subjects are from a 1976-1982 population-based birth cohort, retrospectively, followed from birth until emigration, death, or last follow-up (mean = 17.2 years of follow-up). Medical and school records were reviewed for documented substance abuse and psychostimulant treatment. The association was evaluated using logistic regression models. Results: Socioeconomic characteristics at birth, and comorbidities, were similar between treated and untreated ADHD cases. Sixty (20.3%) of treated ADHD cases had documented substance abuse compared to 23 (27.4%) of cases not treated (OR = 0.7; 95% CI = 0.4-1.2). Among treated ADHD boys, 21.8% had substance abuse compared to 36.4% not-treated ADHD boys (OR = 0.5; 95% CI = 0.3-0.9). Among treated ADHD girls, 15.2% had substance abuse compared to 10.3% not-treated ADHD girls (OR = 1.5; 95% CI = 0.4-6.1). Conclusion: While these results cannot demonstrate cause and effect, our findings indicate that psychostimulant treatment of

childhood ADHD is associated with reduced risk for later substance abuse among boys with ADHD. Copyright 2005, Mary Ann Liebert Inc.

**Reverse gateways? Frequent cannabis use as a predictor of tobacco initiation and nicotine dependence.**

Patton GC; Coffey C; Carlin JB; Sawyer SM; Lynskey M. *Addiction* 100(10): 1518-1525, 2005. (37 refs.)

Aims: To examine the risk posed by cannabis use in young people for tobacco use disorders. Specifically we examined whether cannabis use in non-smokers predicted later initiation of tobacco use and whether cannabis use predicted later nicotine dependence in tobacco users. Design: A 10-year eight-wave cohort study. Setting: State of Victoria, Australia. Participants: A community sample of 1943 participants initially aged 14-15 years. Measurements Self-report of tobacco and cannabis use was assessed in the teens using a computerized interview assessment and in young adulthood with a CATI assessment. The Fagerstrom Test for Nicotine Dependence was used to define nicotine dependence. Findings: For teen non-smokers, at least one report of weekly cannabis use in the teens predicted a more than eightfold increase in the odds of later initiation of tobacco use (OR 8.3; 95% CI 1.9-36). For 21-year-old smokers, not yet nicotine-dependent, daily cannabis use raised the odds of nicotine dependence at the age of 24 years more than threefold (OR 3.6, 1.2, 10) after controlling for possible confounders, including level of tobacco use and subsyndromal signs of nicotine dependence. Conclusions: Weekly or more cannabis use during the teens and young adulthood is associated with an increased risk of late initiation of tobacco use and progression to nicotine dependence. If this effect is causal, it may be that a heightened risk of nicotine dependence is the most important health consequence of early frequent cannabis use. Copyright 2005, Society for the Study of Addiction to Alcohol and Other Drugs.

**The abuse liability of dextromethorphan among adolescents: A review.**

Bobo WV; Miller SC; Martin BD. *Journal of Child & Adolescent Substance Abuse* 14(4): 55-75, 2005. (108 refs.)

Dextromethorphan (DM) is a popular over-the-counter antitussive medication. Although adverse effects from appropriate use are rare, a specific toxidrome with significant psychomimetic effects occurs with ingestions in excess of those recommended. Both DM and its active metabolite, dextrorphan (DOR), share pharmacologic and neurobehavioral properties similar to opiates and phencyclidine (PCP). As Such, cases of

recreational DM abuse and, rarely, dependence, have been reported, and some data Suggest that Such abuse is on the rise. DM may be considered by substance abusers, especially adolescents, to be a dissociative agent devoid of financial concerns, legal limitations, negative stigma, problems with access or adverse health consequences. However, DM's popularity among adolescent substance abusers is generally not matched by adequate health care provider awareness, pharmacological understanding or epidemiological characterization. In this review, we summarize the current understanding of DM's addiction medicine-based neuropharmacology and epidemiology, describe social characteristics more unique to DM as in agent of abuse, review treatment and prevention issues, and identify areas in need of further research. Copyright 2005, Haworth Press, Inc.

**The role of alcohol-specific socialization in adolescents' drinking behaviour.**

van der Vorst H; Engels RCME; Meeus W; Dekovic M; Van Leeuwe J. *Addiction* 100(10): 1464-1476, 2005. (26 refs.)

Aims: To determine which alcohol-specific socialization practices are related to adolescents' alcohol use, and to investigate whether parents differ in their alcohol-specific socialization towards their children. Design: In a sample of 428 families, both parents and two adolescents (aged 13-16 years) completed a questionnaire at home about alcohol-specific parenting and their own alcohol use. Based on the reports of each family member, three different models of alcohol-specific socialization were formulated: from the perspective of the siblings, the mother and the father. Findings: Results of structural equation modelling generally showed the same associations between alcohol-specific socialization and drinking of younger and older adolescents. The strongest association was found for providing alcohol-specific rules. Applying strict rules about alcohol use was negatively related to adolescents' alcohol use; this was also the case for having confidence in the effectiveness of alcohol-specific socialization. Unexpectedly, frequency of communication about alcohol issues was positively associated with alcohol consumption of adolescents. Conclusions: This study is one of the first to examine associations between alcohol-specific socialization and adolescents' drinking using a between- and a within-family design. Results showed strong associations between alcohol-specific socialization (particularly of enforcing rules) and adolescent alcohol use. Although parents strongly differentiated their socialization practices between children, no differences in associations between

alcohol-specific socialization and drinking were found between older and younger adolescents. Copyright 2005, Society for the Study of Addiction to Alcohol and Other Drugs.

**What were they thinking? Adolescents' interpretations of DSM-IV alcohol dependence symptom queries and implications for diagnostic validity.**

Chung T; Martin CS. *Drug and Alcohol Dependence* 80(2): 191-200, 2005. (38 refs.)

Objective: DSM-IV alcohol dependence criteria of tolerance to alcohol and drinking more or longer than intended have relatively high prevalence among youth, and may be vulnerable to false positive symptom assignments that degrade diagnostic validity. We conducted a methodological study of DSM-IV symptom queries used to assess alcohol tolerance and impaired control over drinking to determine potential sources of measurement error. Method: Adolescents recruited from addictions treatment participated in either a focus group (n = 9) or an individual interview (n = 41) to provide data on their interpretation of selected items contained in a semi-structured diagnostic interview. Results: When alcohol tolerance is operationally defined as a change in quantity to obtain the same effect, large individual differences in the change in quantity that represents a high level of tolerance limit the Utility of this operational definition as an indicator of dependence. The symptom "drinking more or longer than intended", includes the embedded assumption that a limit on use had been set. Teens, however, typically intended to become intoxicated, rather than to keep to a limit. Conclusions: Adolescents' understanding of symptom queries suggests how validity of DSM-IV alcohol symptoms and diagnoses can be improved through greater attention to developmental considerations affecting assessment. Copyright 2005, Elsevier Ireland Ltd.

**Is prenatal tobacco exposure a risk factor for early adolescent smoking? A follow-up study.**

Cornelius MD; Leech SL; Goldschmidt L; Day NL. *Neurotoxicology and Teratology* 27(4): 667-676, 2005. (80 refs.)

Recent reports indicate a relation between prenatal tobacco exposure (PTE) and offspring smoking. Many of these reports have been retrospective or have not included important variables such as other prenatal substance exposures, maternal and child psycho-social characteristics, mother's current smoking, and friends' smoking. No prior study has examined the timing of PTE. In this prospective study of a birth cohort of 567 14-year-olds, we examined the relation between

trimester-specific PTE, offspring smoking, and other correlates of adolescent smoking. Average age of the adolescents was 14.8 years (range: 13.9-16.6 years), 51 % were female, 54% were African-American. Data on maternal tobacco and other substance use were collected both prenatally and postnatally, 51 of the mothers were prenatal smokers and 53% smoked when their children were 14 years. PTE in the third trimester significantly predicted offspring smoking (ever/never, smoking level, age of onset) when demographic and other prenatal substances were included in the analyses. PTE remained a significant predictor of the level of adolescent smoking when maternal and child psychological characteristics were added to the model. When more proximal measures of the child's smoking were included in the model, including mother's current smoking and friends' smoking, PTE was no longer significant. Significant predictors of adolescent smoking at age 14 were female gender, Caucasian race, child externalizing behavior, maternal anxiety, and child depressive symptoms. Although direct effects of PTE on offspring smoking behavior have previously been reported from this study and by others, by early adolescence, this association is not significant after controlling for the more proximal covariates of adolescent smoking such as mother's current smoking and peer smoking. Copyright 2005, Elsevier Science Ltd.

**Nonmedical use of prescription opioids among teenagers in the United States: Trends and correlates.**

Sung HE; Richter L; Vaughan R; Johnson PB; Thom B. *Journal of Adolescent Health* 37(1): 44-51, 2005. (26 refs.)

PURPOSE: This article reports on trends and correlates of the nonmedical use of prescription opioids among youth. METHODS: Secondary analyses of data from the National Survey on Drug Use and Health were performed on youths, ages 12 to 17. RESULTS: Analyses revealed evidence of an emerging epidemic of opioid misuse among teenagers. Sub-groups of youth at particularly high risk include females, blacks, those of lower socio-economic status, and those who hold favorable attitudes toward illicit drugs, have detached parents, or have friends who use illicit drugs. Respondents' own use of other illicit drugs is the strongest predictor of their nonmedical use of prescription opioids. CONCLUSIONS: Nonmedical use of prescription opioids is a recurrent epidemic and valuable lessons from past epidemics of this nature can be learned if historical data are studied. Prevention campaigns should target groups at risk for substance

abuse and focus on improving family bonds and peer-resistance skills. Copyright 2005, Society for Adolescent Medicine.

**Party drugs and party people: Examining the 'normalization' of recreational drug use in Melbourne, Australia.**

Duff C. *International Journal of Drug Policy* 16(3): 161-170, 2005. (31 refs.)

This paper reports the findings of survey research recently completed in Melbourne, Australia among a sample of 379 bar and nightclub patrons. Drawing from the work of English researchers Howard Parker and Fiona Measham, this study examines the 'normalization' of young people's drug use and the links between this drug use and young people's 'time out' -- their leisure time and 'cultural consumption' habits. The paper outlines the research participants' use of alcohol and other drugs including measures of both 'lifetime' and more recent use; the prevalence of illegal drug use within the peer group; the general accessibility and availability of illegal drugs, as well as participants' knowledge of various drug-related risks and harms. The use of alcohol and other drugs was found to be widespread, with 96% of survey respondents identifying as 'current drinkers', whilst 56% reported the 'lifetime use' of illegal drugs. Just over a third (35.2%) reported the recent (last month) use of an illegal drug, typically ecstasy, cannabis and/or amphetamines. I conclude that such findings provide further support for the claim that drug use is becoming increasingly normalized within youth populations in Australia. The paper closes with a brief discussion of the implications of these findings in terms of the design and implementation of drug prevention and harm minimisation strategies in Australia and elsewhere. Copyright 2005, Elsevier Science BV.

**Tobacco industry research on smoking cessation: Recapturing young adults and other recent quitters.**

Ling PM; Glantz SA. *Journal of General Internal Medicine* 19(5, Part 1): 419-426, 2004. (70 refs.)

Background: Smoking rates are declining in the United States, except for young adults (age 18 to 24). Few organized programs target smoking cessation specifically for young adults, except programs for pregnant women. In contrast, the tobacco industry has

invested much time and money studying young adult smoking patterns. Some of these data are now available in documents released through litigation. Objective: Review tobacco industry marketing research on smoking cessation to guide new interventions and improve clinical practice, particularly to address young adult smokers' needs. Methods: Analysis of previously secret tobacco industry documents. Results: Compared to their share of the smoking population, young adult smokers have the highest spontaneous quitting rates. About 10% to 30% of smokers want to quit; light smokers and brand switchers are more likely to try. Tobacco companies attempted to deter quitting by developing products that appeared to be less addictive or more socially acceptable. Contrary to consumer expectations, "ultra low tar" cigarette smokers were actually less likely to quit. Conclusions: Tobacco industry views of young adult quitting behavior contrast with clinical practice. Tobacco marketers concentrate on recapturing young quitters, while organized smoking cessation programs are primarily used by older smokers. As young people have both the greatest propensity to quit and the greatest potential benefits from smoking cessation, targeted programs for young adults are needed. Tobacco marketing data suggest that inspirational messages that decrease the social acceptability of smoking and support smoke-free environments resonate best with young adult smokers' motivations. Copyright 2004, Blackwell Publishing Inc.

**What smoking cessation approaches will young smokers use?**

Leatherdale ST; McDonald PW. *Addictive Behaviors* 30(8): 1614-1618, 2005. (10 refs.)

The purpose of this study was to examine the attitudes of youth smokers toward nine common smoking cessation approaches. Attitudes were examined among 3660 youth smokers who intended to quit smoking. The majority of youth smokers report that they would never use the smoking cessation approaches that are commonly recommended for youth populations. The approaches that were appealing to youth are quitting on their own and using the advice of friends. Future initiatives need to more effectively communicate to youth the benefits of existing cessation approaches, make existing interventions more appealing, or develop new approaches that address youth needs. Copyright 2005, Elsevier Science Ltd.