AddictionTherapy-2013

OMICS Group Conferences
Accelerating Scientific Discovery

2nd International Conference and Exhibition on
Addiction Research & Therapy

July 22-24, 2013 Las Vegas, USA

Prevalence of co-morbid disorders in addition to cocaine dependence and their impact

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Abstract

As evidence-based interventions evolve, researchers examine their impact on co-morbid disorders. We examined prevalence of co-morbid disorders in addition to cocaine dependence and their impact on abstinence outcomes. Data from a randomized controlled trial comparing the effectiveness of abstinence contingent housing and work (CM) to the same CM components plus manualized behavioral day treatment (CM+) were used. Disregarding original trial arm assignment, frequency of additional Axis I Disorders was enumerated. New groups of No Additional Axis I Disorders and ≥ Additional Axis I were compared for abstinence outcomes. The Beck Depression Inventory (BDI) was used as a proxy measure for the additional Axis I Disorder, Depression. We examined impact of abstinence on depression symptoms as a function of four cohorts of consecutive weeks abstinent 0-6, 7-12, 13-18 and 19-24 weeks. In an auto-regressive cross-lagged Structural Equation Model (SEM) we examined the reciprocal relationships between depression and abstinence. Most prevalent additional Axis I disorders were Depressive Disorders and Anxiety Disorders. Co-morbid disorders did not affect abstinence. Cohorts with progressively more abstinence were linearly related to lower depression. The SEM showed that longer abstinence predicted decreased depressive symptoms at two, six and 12 months. However, depressive symptoms did not predict changes in abstinence at any time point. Effects persisted over six months of active treatment and 12 months of aftercare. With this effective substance abuse treatment, there was no difference in abstinence associated with co-morbid disorders. Results suggest abstinence may play a more important role in reduced depression than reduced depression plays in improved abstinence. If the unidirectional impact of targeted treatment on depression in recent studies is replicated with other disorders, it may have important implications for standard treatment, and understanding the nature of some depressive disorders as a general mood state often modifiable by changes in specific behavior domains.

Biography

Dr. Jesse Milby is currently a Professor of Psychology at University of Alabama at Birmingham. He persued his B.A., English in 1962 from Eastern Baptist College, St. Davids, PA, completed his PhD in 1968 with the subjects of clinical Psychology from University of Alabama, Tuscaloosa, AL and did Post-docs from three different institutes from University of London Institute of Psychiatry (Behavior Therapy), Temple University, Eastern PA Psychiatric Institute (Behavior Therapy) & Johns Hopkins University (Clinical Psychopharm) during the period from 1977-2005. He also gain the acknowledgement for many peer reviewed publications.