CBT Effective for Cannabis Users in Small Study

BY CAROLYN HEWITT

From the Annual Congress of the American Society of Neurropsychopharmacology

Amsterdam – A targeted behavioral treatment program designed by researchers in the Netherlands for cannabis use disorder promoted abstinence in 40% of subjects at 6 months, and significantly reduced global addiction severity and psychopathological symptoms.

The approach was described at the congress by Hans-Ulrich Wittchen, Ph.D., director of the Institute of Clinical Psychology and Psychotherapy at Technische Universität Dresden. The 12-week CBT program was 6 months after treatment, while when urine tests were done. This is a remarkable finding that we did not expect at the beginning,” Dr. Wittchen said. For many individuals, cannabis is the primary drug of abuse. Regular heavy use is associated with a substantial risk of a cannabis-dependence syndrome and when this is combined with other substance-abuse and internalizing disorders, the risk for poor psychological, cognitive, and mental health problems.

“Cannabis use is regularly associated with a wide range of psychological symptoms, and the largest group have depression. Patients with primary CUD [cannabis-use disorder] have been the largest group in substance-abuse centers in many European countries. These individuals have different profiles and treatment needs that are not easily accommodated by current systems. No clear intervention strategies have been developed,” Dr. Wittchen said.

Continued on following page
Weight Concerns Prevail Among White, Black Smokers

BY SHARON WORCESTER
FROM ADDICTIVE BEHAVIORS

General and smoking-specific weight concerns were more common among white women than among white men and black men and women preparing to quit smoking, but weight concerns were prevalent in all of the groups, according to a study of 301 individuals enrolled in the Chicago STOP Smoking trial.

For example, black women had the highest scores for “body dissatisfaction,” and their scores in regard to smoking-specific weight concerns were statistically similar to those of white women. Men also had substantial smoking-specific weight concerns, which were defined as the belief that smoking can be used for weight control and that quitting smoking leads to weight gain, Lisa A.P. Sánchez-Johnsen, Ph.D., and her colleagues in the department of psychiatry and behavioral neuroscience at the University of Chicago reported online in Addictive Behaviors.

The findings, some of which contradict conventional wisdom about cultural differences in weight and body image between black and white adults, suggest that both groups have specific concerns about weight and body image that could be important in the development of smoking-cessation programs, the investigators said.

Participants were 73 black women, 46 black men, 90 white women, and 52 white men, overall. General weight concerns (defined by summed scores on the drive for thinness and body dissatisfaction subscales of the Eating Disorders Inventory–2, and the restraint factor of the Three-Factor Eating Questionnaire) were more common in white vs. black participants, and female vs. male participants, but no race by sex interactions were found, the investigators reported (Addict. Behav. 2010 Aug. 6 (doi:10.1016/j.addbeh.2010.08.001)).

Women had significantly higher mean scores (after controlling for age, body mass index, socioeconomic status, and cigarettes smoked per day) than did men on the specific measure of “drive for thinness” (mean of 4.3 vs. 1.8 and 4.0 vs. 2.2 for white and black participants, respectively), and on the specific measure of “body dissatisfaction” (mean of 10.2 vs. 5.0 and 10.9 vs. 5.5 for white and black participants, respectively), but the scores did not differ significantly between whites and blacks.

Major Finding: Women had significantly higher mean scores than men on the specific measure of “drive for thinness” (mean of 4.3 vs. 1.8 and 4.0 vs. 2.2 for white and black participants, respectively), and on the specific measure of “body dissatisfaction” (mean of 10.2 vs. 5.0 and 10.9 vs. 5.5) for white and black participants, respectively, but the scores did not differ significantly between whites and blacks.

Data Source: An analysis of data from a clinical trial examining a combined pharmacologic and behavioral intervention for smoking cessation.

Disclosures: The main investigator reported that neither she nor her colleagues had relevant conflicts to disclose.

Cigarette smoking is highly prevalent among Black and White adults, and smoking-specific weight concerns are more common among white women than among white men and black men and women preparing to quit smoking, but weight concerns were prevalent in all of the groups, according to a study of 301 individuals enrolled in the Chicago STOP Smoking trial.

For example, black women had the highest scores for “body dissatisfaction,” and their scores in regard to smoking-specific weight concerns were statistically similar to those of white women. Men also had substantial smoking-specific weight concerns, which were defined as the belief that smoking can be used for weight control and that quitting smoking leads to weight gain, Lisa A.P. Sánchez-Johnsen, Ph.D., and her colleagues in the department of psychiatry and behavioral neuroscience at the University of Chicago reported online in Addictive Behaviors.

The findings, some of which contradict conventional wisdom about cultural differences in weight and body image between black and white adults, suggest that both groups have specific concerns about weight and body image that could be important in the development of smoking-cessation programs, the investigators said.

Participants were 73 black women, 46 black men, 90 white women, and 52 white men, overall. General weight concerns (defined by summed scores on the drive for thinness and body dissatisfaction subscales of the Eating Disorders Inventory–2, and the restraint factor of the Three-Factor Eating Questionnaire) were more common in white vs. black participants, and female vs. male participants, but no race by sex interactions were found, the investigators reported (Addict. Behav. 2010 Aug. 6 (doi:10.1016/j.addbeh.2010.08.001)).

Women had significantly higher mean scores (after controlling for age, body mass index, socioeconomic status, and cigarettes smoked per day) than did men on the specific measure of “drive for thinness” (mean of 4.3 vs. 1.8 and 4.0 vs. 2.2 for white and black participants, respectively), and on the specific measure of “body dissatisfaction” (mean of 10.2 vs. 5.0 and 10.9 vs. 5.5) for white and black participants, respectively, but the scores did not differ significantly between whites and blacks.

Smoking-specific weight concerns also were highest in white women, but the differences were significant only between white women and white and black men (respective scores, 7.7, 6.0, and 6.3). Black women had substantial smoking-specific weight concerns measured in the study, the investigators reported.

Smoking-specific weight concerns also were highest in white women, but the differences were significant only between white women and white and black men (respective scores, 7.7, 6.0, and 6.3). Black women had substantial smoking-specific weight concerns (score, 6.8).

The findings could be key to the development of smoking-cessation programs that address weight concerns for black and white men and women, the researchers concluded.