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The role of behavioural measures of impulsivity in the development of alcohol dependence

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Background: The link between impulsivity and alcohol use disorders has been established in longitudinal and cross-sectional studies, but little is known about the role of behavioural impulsivity in the development of substance use disorders.

Objectives: Determine the role of behavioural measures of impulsivity in the development of alcohol use disorders.

Design and measurements: A prospective cohort study was conducted to identify the risk factors associated with alcohol dependence. Non-dependent heavy drinkers (N=471) and healthy controls (N=149) were recruited from primary care centres. They were assessed at the end of the 4-year follow-up period. Diagnoses were rendered using the Structured Interview for DSM-IV. The continuous performance test (CPT) and stop-signal task (SST) assessed behavioural inhibition. Differential reinforcement for low-rate responding (DRLR) was used to evaluate the delay discounting dimension.

Results: HD participants have significant impairments on all laboratory measures of impulsivity. In the logistic regression model, impairment on DRLR (delay discounting dimension) was the only measure that classified accurately HD. Baseline behavioural measures of impulsivity correlated positively with amount of alcohol consumption during the follow-up period. Logistic regression analysis indicated that performance on inhibitory control (SST) (behavioural inhibition dimension) was a significant predictor (odds=1.52[1.08–2.31]) for developing alcohol dependence.

Conclusions: Our data support the link between behavioural measures of impulsivity and alcohol use disorders. Delay discounting dimension may be a risk factor for begin alcohol use heavily and behavioural inhibition impairment is more involved in the development of dependence.

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Cocaine use provokes chronic impulsivity in heavy drinkers

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Background: Different types of behavioural impulsivity have been associated with the development of substance use disorders but little is known about what type of impulsivity is provoked by the effect of chronic use of substances.

Objectives: Determine what type of behavioural impulsivity was associated with the use of alcohol and cocaine.

Design and measurements: A prospective cohort study was conducted to identify changes on behavioural impulsivity. Non-dependent heavy drinkers (N=471) were recruited from primary care centres. The following assessments were used at baseline and at the end of the 4-year follow-up period: The continuous performance

test (CPT) and stop-signal task (SST) assessed behavioural inhibition. Differential reinforcement for low-rate responding (DRLR) was used to evaluate the delay discounting dimension. Diagnoses were rendered using the Structured Interview for DSM-IV.

Results: Amounts on alcohol and cocaine consumption during follow-up correlated positively with changes on all impulsivity measures. Logistic regression analysis indicated that cocaine used was associated specifically with poor performance on CPT and SST and amount of alcohol used during follow-up was related to changes on DRLR.

Conclusions: Substances provoke different pattern of behavioural impulsivity: chronic cocaine use provokes changes mainly on behavioural inhibition dimension and alcohol use induces changes on delay discounting paradigm.

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Moods and expectations relating to a typical drinking occasion for women with alcohol dependence in Sweden

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Background and Aims: The presentation focuses on women's drinking problems, early relations, their mood states and expectancies as important factors influencing individual patterns of drinking. The objective is two-fold: (1) to investigate states of mood and expectancies preceding a typical drinking occasion; and (2) to study possible connections between mood state, expectancies, and relation to parents versus drinking patterns.

Methods: The population consists of 50 female alcohol patients from a Swedish clinic for women with alcohol dependence problems. Semi-structured interviews were conducted. A mixed method design was used to treat qualitative interview-data and quantitative data from questionnaires and medical journals.

Results: Four out of five patients were children of parents with dependence problems. Moods were described by patients as mostly negative states, and expectancies showed a preference for escaping from a stressful situation or for enhancing one's own experience. About 60 % of the patients reported negative family relations, pointing to deficient parental modeling.

Conclusions: Sweden represents a non-traditional culture with multiple role demands. Thus, it is proposed that coping characterized by the urge to escape from overwhelming pressures may be a risk factor for drinking problems in the present patient population. Combined analyses of quantitative and qualitative data will be presented and the discussion will focus on the need to develop treatment designs that include gender and cultural analyses.

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Alcoholism and major affective disorder

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