

Alcohol Treatment

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September 23, 2009

Co-morbidity of Alcohol and Other Drugs

- With the exception of nicotine dependence, psychiatric co-morbidity has greater co-morbidity with alcohol dependence.
- Even nicotine dependence occurs in a minority of those with alcohol use disorders.
 - 34.5% of those with past year alcohol use disorder meet current criteria for nicotine dependence
 - 22.8% of those with past year nicotine dependence meet current criteria for an alcohol use disorder

Psychiatric and Other Drug Co-Morbidity: Gaps in Research?

- Initial studies of new medications for alcohol often exclude *current dependence* on other drugs (except nicotine), major psychiatric disorders, and the medically ill.
- Similarly, alcohol dependent patients are typically excluded from initial studies of drug dependence
- Promising findings in one area are rapidly followed up in patients with other drug use, psychiatric co-morbidity or medical illness

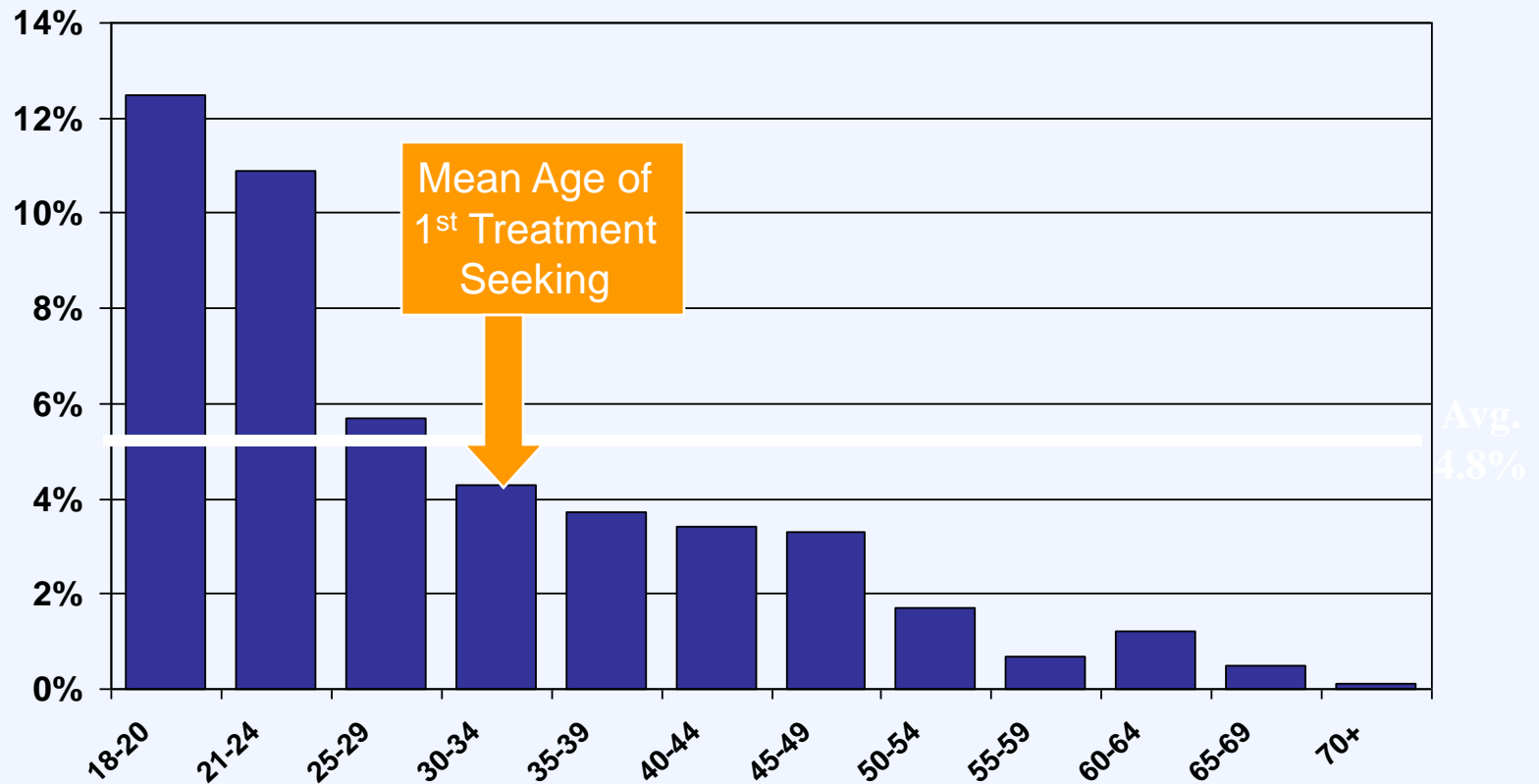
Varenicline

- Approved for smoking cessation based on drug company research in smokers without substantial co-morbidities in May 2006
- Status of Research in 2009
 - 24 grants on CRISP
 - 114 studies on Clinical Trials.gov
 - Populations and Indications Expanded
 - Alcohol dependence, methamphetamine, cocaine
 - Patients with schizophrenia, bipolar illness, ADD, depression
 - Head and neck cancer, other medical co-morbidities

Goals of Treatment

- Treatment of drug abuse has the primary goal of abstinence, a shared goal for those with significant alcohol dependence
- However, other goals may be appropriate for the larger group of hazardous drinkers.
- The development of treatments that help heavy drinkers reliably maintain safe drinking limits will be attractive to patients and should have large public health benefits

Prevalence of Past-year DSM-IV Alcohol Dependence: United States, 2001-2002



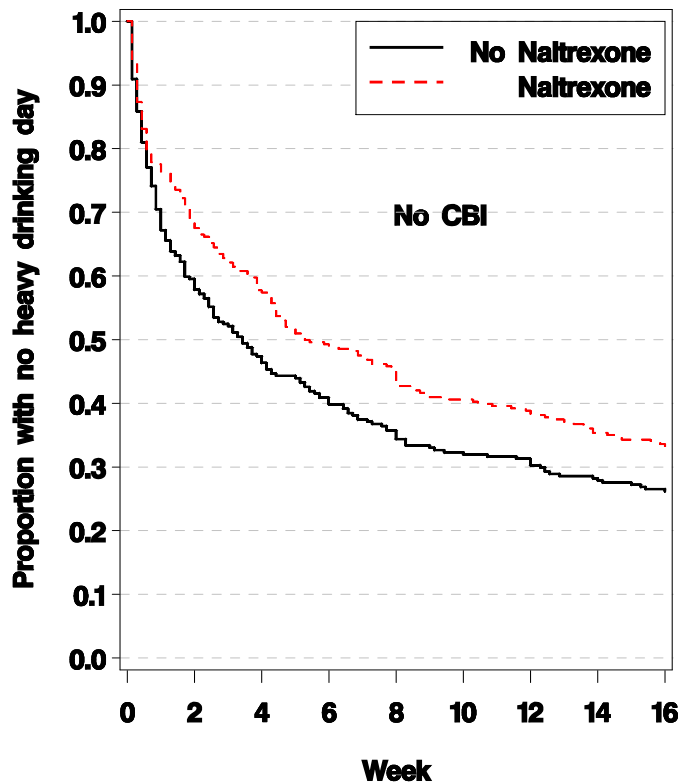
Source: Grant BF et al. *Drug Alcohol Depend.* 2004. 74(3):223-34.

College Students Are More Interested in Reducing than Quitting Drinking

	Large Public University		Private University	
	Cut-down	Stop	Cut-down	Stop
Maybe – Definitely	13.8%	5.7%	14.3%	6.3%
N	2233	2219	321	316

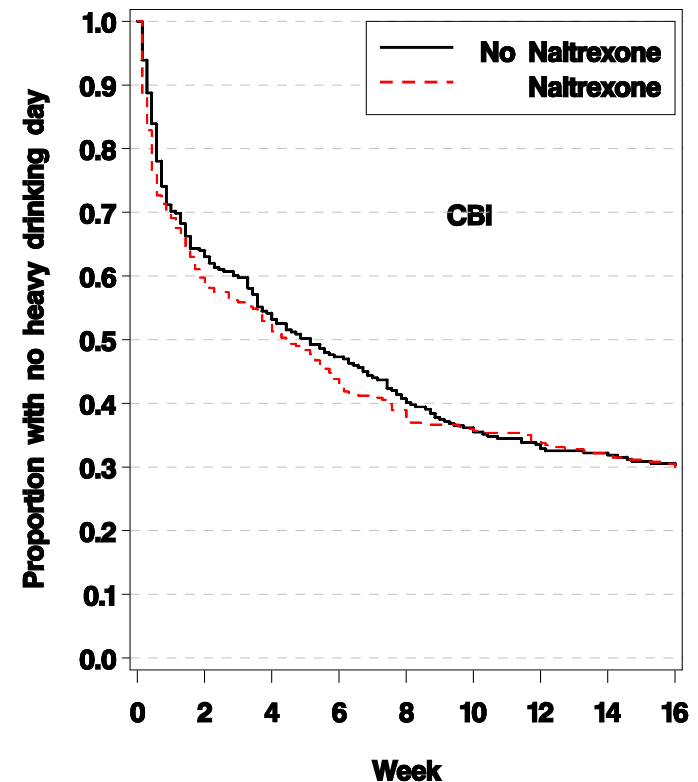
Naltrexone Shows Modest Effects on Return to Heavy Drinking in Alcohol Dependent Patients with Medical Management

MM Only



MM + Behavioral Therapy

$p=0.15$



The COMBINE Study (Anton et al, 2006)

Does NIAAA's Integrated Focus on All Aspects of Alcohol Benefit Treatment?

- Research on alcohol toxicity has informed the specification of “safe limits” for drinking and brief interventions that draw links between these harmful health effects and advice to reduce drinking
- The US Preventive Services Task Force recommends screening and brief interventions for unhealthy alcohol use for adults, including pregnant women, in primary care centers.

USPSTF, 2004,

<http://www.ahrq.gov/clinic/3rduspstf/alcohol/alcomisrs.htm>

Does NIAAA's Integrated Focus on All Aspects of Alcohol Benefit Treatment?

- Research on the mechanisms alcohol's effects on organ pathology could ultimately lead to new treatments for hazardous alcohol use.
- NIAAA Report to the Advisory Council on "Gut-Liver-Brain Interactions in Alcohol-Induced Pathogenesis" is an exemplar

Current Organizational Structure

- Examples of collaborations between NIAAA and NIDA
 - Transdisciplinary Tobacco Use Research Centers
 - Interdisciplinary Consortium on Stress, Self-Control and Addiction
 - Workgroups formed by either Institute typically invite program staff and extramural investigators from the other institute
- Treatment researchers focused on alcohol follow the work of their colleagues in drug abuse and vice versa

Benefits of an Institute Focused on Alcohol

- Systems biology approach to studying the effects of alcohol drinking on health and disease is an important strength made possible by having an Institute devoted to all aspects of alcohol use, abuse and dependence.
- This integrated approach promotes exchange of ideas and collaborations across disciplinary boundaries that would be unlikely to occur otherwise