

Regular article

Followup of cocaine-dependent men and women with antisocial personality disorder

Christine E. Grella, Ph.D. *, Vandana Joshi, Ph.D., Yih-Ing Hser, Ph.D.

UCLA Drug Abuse Research Center/Integrated Substance Abuse Programs, 1640 S. Sepulveda Blvd., Suite 200, Los Angeles 90025, USA

Abstract

Long-term outcomes following drug treatment were examined for cocaine-dependent men ($N = 453$) and women ($N = 254$) with and without antisocial personality disorder (ASP). In-depth assessments were conducted at treatment intake in 1991–93 and at 1 and 5 years following treatment discharge. Overall, 47.2% of the males and 34.3% of females were diagnosed with ASP using DSM-III-R criteria derived from the Diagnostic Interview Schedule. All groups reduced their cocaine, marijuana, and alcohol use; reduced their levels of psychological distress; and improved in functioning (e.g., employment, arrests, residential status). At Year 5 ASP was associated with an increased likelihood of heavy alcohol use and additional substance abuse treatment among men, whereas women with ASP were more likely to report psychological problems and to receive mental health treatment and other services than either women without ASP or men with ASP. The findings suggest the need to address the specific treatment needs of male and female cocaine abusers with ASP. © 2003 Elsevier Inc. All rights reserved.

Keywords: Antisocial personality disorder; Cocaine dependence; Gender; Drug treatment outcomes; Service utilization

1. Introduction

Both clinical and epidemiological studies have documented high rates of co-occurrence of adult antisocial personality (ASP) disorder and substance use disorders among individuals in drug treatment (Alterman & Cacciola, 1991; Flynn, Craddock, Luckey, Hubbard, & Dunteman, 1996; Kleinman et al., 1990; Rounsaville et al., 1991) and in the general population (Kessler et al., 1996). Studies have also shown that the rates of comorbidity of ASP with substance use disorders differ by gender. Men with ASP are three times as likely to abuse alcohol and five times as likely to abuse drugs as men without ASP. These ratios are even higher for women with ASP compared to women without ASP: 13 times for alcohol and 12 times for drugs (Robins, Tipp, & Przybeck, 1991).

Since the rates of ASP among individuals in drug treatment are consistently high, there is considerable interest in the prognostic significance of ASP for drug treatment response. Previous research with male opiate users showed

that a diagnosis of ASP predicted poorer outcomes to psychotherapy, although patients with both ASP and depression responded more favorably (Woody, McLellan, Luborsky, & O'Brien, 1985). Antisocial personality disorder has also been associated with higher rates of treatment drop-out among substance abusers in an inpatient dual diagnosis unit (Greenberg, Otero, & Villanueva, 1994) and with poorer outcomes at 1 year after inpatient treatment for alcoholism (Hesselbrock, 1991). The characteristic behaviors and personality traits associated with ASP, such as lack of motivation, disruptiveness, impulsivity, and general disregard for others, are assumed to conflict with the ability to engage in and respond positively to treatment, resulting in lower rates of treatment retention and completion and poorer posttreatment outcomes.

Several studies have shown that greater severity of psychopathology and drug use are associated with poorer treatment outcomes among cocaine abusers (Carroll, Power, Bryant, & Rounsaville, 1993), yet findings regarding the relationship of ASP with treatment outcomes for cocaine abusers are mixed. McKay, Alterman, Cacciola, Mulvaney, and O'Brien (2000) showed that a diagnosis of ASP among cocaine-dependent males did not differentiate rates of treatment retention, substance use outcomes, social functioning outcomes, or responses to two types of continuing care

* Corresponding author. Tel.: +1-310-445-0874, ext. 243; fax: +1-310-473-7885.

E-mail address: grella@ucla.edu (C.E. Grella).

interventions over a period of 12 months. Patients with ASP, however, did have more severe medical and psychiatric problems, both before and after treatment. Similarly, Cacciola, Alterman, Rutherford, and Snider (1995) reported no difference in treatment response in several functional domains among cocaine- and/or alcohol-dependent men with ASP over a posttreatment period of 7 months. In another study, patients with and without ASP had similar rates of treatment completion and reductions in drug use following treatment in two therapeutic community conditions that differed in length of inpatient and outpatient treatment over a period of 12 months (Messina, Wish, & Nemes, 1999). These subjects ($N = 338$) were predominantly heroin and/or cocaine abusers, and about 27% were female. A recent experimental study compared the efficacy of two treatment approaches (cognitive behavioral and contingency management) for cocaine dependence among methadone-maintained patients with and without ASP ($N = 108$). Patients with ASP performed better in the contingency management condition and had higher rates of posttreatment abstinence for a period of up to 1 year, compared to those without ASP (Messina, Farabee, & Rawson, 2003).

Perhaps because of the mixed findings from prior treatment studies of substance abusers with ASP, there is disagreement about the prognostic significance of ASP (Brooner, Kidorf, King, & Stoller, 1998; Brooner, Schmidt, Felch, & Bigelow, 1992). Moreover, previous studies have been limited in the degree to which they can fully address the outcomes of individuals with ASP. First, most studies have assessed posttreatment response for brief periods, usually no more than 1 year. Second, most studies have been conducted with either all-male or predominantly male samples with small sample sizes that have precluded analyses of interactions of gender and ASP. There is reason to believe that cocaine-dependent women and men with ASP may respond differently to treatment, since women with ASP are more likely to have other comorbid psychiatric disorders (e.g., anxiety disorders; Kessler et al., 1994). Further, women with ASP may have more severe drug-use histories and greater severity of symptoms, since the behaviors characteristic of ASP (e.g., criminality, aggression, impulsivity) are considered to be more socially deviant in women than in men. Previous studies of cocaine abusers (Griffin, Weiss, Mirin, & Lange, 1989; Halikas, Crosby, Pearson, Nugent, & Carlson 1994; Kosten, Gawin, Kosten, & Rounsaville, 1993; Weiss, Martinez-Raga, Griffin, Greenfield, & Hufford, 1997) have shown more severe symptoms and problems in functioning among women than men, and the addition of a diagnosis of ASP may further exacerbate these differences. Moreover, treatment/services utilization may differ for men and women with ASP. Our previous work has shown that a diagnosis of ASP was associated with a history of prior drug-treatment utilization among women, but not men, in drug treatment (Grella & Joshi, 1999).

This article presents data from the Drug Abuse Treatment Outcome Studies (DATOS), a multisite prospective study of drug treatment outcomes sponsored by the National Institute on Drug Abuse. We utilized this large-scale study of individuals admitted to community drug treatment programs in the United States in the 1990s in order to address three questions regarding the relationship of gender and ASP to drug treatment outcomes: (1) Are there differences in the characteristics of cocaine-dependent men and women with ASP? (2) Are there differences in rates of drug use and other areas of functioning over a 5-year period for cocaine-dependent men and women with ASP, as compared with cocaine-dependent patients without ASP? (3) Is ASP differentially related to 5-year posttreatment outcomes for men and women? To address these questions, we examine patient characteristics and treatment outcomes across several domains (i.e., substance use, psychological distress, level of functioning), and patterns of treatment and services utilization following the index DATOS treatment episode for four subgroups of patients: men and women, with and without ASP.

2. Methods

2.1. Sample

The DATOS treatment population included a total of 10,010 patients admitted to 96 drug treatment programs from 1991 to 1993 in 11 cities in the United States (see Flynn, Craddock, Hubbard, Anderson, & Etheridge, 1997, for a detailed description of the DATOS research design and methods). These programs were sampled purposively in an attempt to assure representative and naturalistic sources of data. A description of the type of treatment delivered to patients within each modality is available in Etheridge, Hubbard, Anderson, Craddock, and Flynn (1997). Patients included 2,774 admissions to 21 long-term residential (LTR) programs; 3,122 admissions to 14 short-term inpatient (STI) programs; 2,574 admissions to 32 outpatient drug-free, or non-methadone, (ODF) programs; and 1,540 admissions to 29 outpatient methadone treatment (OMT) programs. A stratified sampling plan was used to select 4,229 of the original sample of 10,010 for a followup interview at 12 months after discharge. Altogether, 3,147 (74.4%) were located; 2,966 (70.1%) were interviewed, 64 (1.5%) were dead, and 117 (2.8%) refused to be interviewed.

The sample selected for the present study originated with the subgroup of 1,648 cocaine-dependent patients who completed the 1-year followup interview (excluding patients in methadone programs since they were primarily opiate users and may not have received treatment for cocaine use). From that original sample, individuals ($n = 638$, 38.7%) who were deemed inaccessible or who were located in cities where the small sample size made the cost of fieldwork prohibitive were eliminated from the sampling frame (see

متن کامل مقاله

دریافت فوری ←

ISIArticles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات