

Regular article

Antisocial personality in treatment-seeking cocaine abusers: Psychosocial functioning and HIV risk

George T. Ladd, Nancy M. Petry*

Department of Psychiatry, University of Connecticut School of Medicine, 263 Farmington Avenue, Farmington, CT 06030-3944, USA

Received in revised form 28 February 2003; accepted 9 March 2003

Abstract

Antisocial personality disorder (ASP) is common in substance abusers and may be associated with increased severity of psychosocial problems and risk of HIV infection. This study compared 174 treatment-seeking cocaine abusers with and without ASP on Addiction Severity Index (ASI) scores and the HIV risk behavior scale. Patients with ASP comprised 35% of the sample. These patients evidenced more severe problems than non-ASP patients on alcohol, legal, and psychiatric indices of the ASI. Patients with ASP also reported greater participation in lifetime sexual risk behaviors, including number of casual sexual partners, inconsistent condom use, and frequency of anal sex. This study suggests the importance of screening for ASP when patients initiate treatment. Specific and more intensive treatment may be necessary to improve outcomes in this patient population. © 2003 Elsevier Inc. All rights reserved.

Keywords: Cocaine abuse; Treatment; Antisocial personality disorder; HIV risk behaviors

1. Introduction

Antisocial personality disorder (ASP) is characterized by poor social conformity and is associated with criminality, deceitfulness, irresponsibility, lack of remorse, and impulsivity (American Psychiatric Association, 1994). The cognitive and emotive deficiencies that underlie ASP, such as poor self-control, ineffective behavioral regulation, and poor decision-making, may facilitate and maintain patterns of substance use (Alterman & Tarter, 1986), which in turn may be associated with poor response to treatment (Alterman & Cacciola, 1991).

Several studies have identified ASP as a common psychiatric condition in substance abusers with rates ranging from 23% to over 80% (Brooner, Bigelow, Strain, & Schmidt, 1990; Brooner, Schmidt, Felch, & Bigelow, 1992; Brooner, King, Kidorf, Schmidt, & Bigelow, 1997; Carroll et al., 1993; Compton, Cottler, Shillington, & Price, 1995; Goldstein et al., 1998; Kelley & Petry, 2000; McKay, Alterman, Cacciola, Mulvaney, & O'Brien, 2000; Morgenstern, Langenbucher, Labouvie, & Miller, 1997; Regier

et al., 1990). Concurrent ASP among substance abusers is associated with greater severity of substance use problems, higher rates of continued substance use, and greater psychosocial impairment (Brooner, Greenfield, Schmidt, & Bigelow, 1993; Cadoret, Troughton, & Widmer, 1984; Carroll, Rounsaville, & Bryant, 1993; Nace, Davis, & Gaspari, 1991; Schuckit, 1985). For instance, one study of 577 adults in alcohol treatment (Schuckit, 1985) found that those who had ASP drank more alcohol and were more likely to have been fired or demoted at work. Alcohol disordered patients with ASP were also more likely to have served time in jail than those without ASP (Schuckit, 1985). This greater level of dysfunction among substance abusers with ASP has been associated with poor response to treatment as well (Alterman & Cacciola, 1991).

Substance abusers with concurrent ASP may be fundamentally different from those without ASP with regard to the etiology of their substance abuse/dependence and the nature of their psychiatric conditions. One study of 425 patients in drug abuse treatment found that ASP was a primary disorder in that its onset generally occurred prior to the onset of drug dependence (Compton, Cottler, Phelps, Ben-Abdallah, & Spitznagel, 2000). In contrast to other psychiatric conditions including depression, dysthymia, generalized anxiety, and alcohol dependence, ASP was the only condition clearly preceding drug dependence (Comp-

* Corresponding author. Tel.: +1-860-679-2593; fax: +1-860-679-1312.

E-mail address: petry@psychiatry.uhc.edu (N.M. Petry).

ton et al., 2000). Thus, evaluations focusing on the manners in which substance abusers with and without concurrent ASP differ may assist in determining how ASP leads to and maintains drug abuse.

Antisocial personality disorder in substance abusers may be indicative of poor psychosocial functioning. Studies have evaluated the relationship between ASP and psychiatric symptoms in general population of substance abusers, including alcohol and opioid abusers (Brooner, Greenfield, et al., 1993; Cadoret et al., 1984; Carroll et al., 1993; Nace et al., 1991; Schuckit, 1985). However, only a few studies have focused specifically on psychiatric symptoms in cocaine abusers with and without ASP. In a study of 127 cocaine-dependent male veterans, McKay et al. (2000) found ASP to be associated with higher psychiatric scores on the Addiction Severity Index. In contrast, Rutherford, Cacciola, and Alterman (1999) did not find any association between ASP and psychiatric symptoms in 137 cocaine-dependent women.

Studies of general substance abusers (Kelley & Petry, 2000) and opioid abusers (Brooner et al., 1990; Brooner, Greenfield, et al., 1993; Gill, Nolimal, & Crowley, 1992; King, Kidorf, Stoller, & Brooner, 2000) found that ASP is associated with a range of drug use and sexual behaviors that increase risk for HIV infection. Among a community sample of 351 adults who had used cocaine in the past 6 months, Compton et al. (1995) reported that those with concurrent ASP had higher rates of risky drug use behaviors and sex behaviors than non-ASP cocaine users. For example, Compton et al. (1995) report that, compared to cocaine users without ASP, those with ASP were more likely to have exchanged money for sex (18.7% vs. 5.8%), and exchanged drugs for sex (50.8% vs. 9.0%). An 18-month follow-up study with the same sample found cocaine users with concurrent ASP remained at greater risk for developing HIV despite intervention (Compton, Cottler, Spitznagel, Ben-Abdallah, & Gallagher, 1998). While existing studies have examined the association of ASP and HIV risk (Compton et al., 1995, 1998) in community samples of cocaine users, no studies have focused on this relationship in treatment-seeking cocaine abusers.

This study seeks to replicate previous research that suggests an association between ASP and HIV risk behaviors among cocaine abusers. It will also extend the limited body of knowledge regarding the relationship between ASP and psychosocial functioning in individuals seeking outpatient treatment for cocaine abuse by comparing cocaine abusers with ASP to those without ASP on a range of psychosocial distress indicators. We expected that cocaine abusers with ASP would exhibit increased legal difficulties and psychiatric symptoms and show greater HIV risk than those without ASP. Overall, this study will contribute to an understanding of how ASP may influence the psychosocial problems of cocaine abusers seeking treatment. This information may be useful for better identifying the treatment needs of this population.

2. Methods

2.1. Subjects

This study is a retrospective analysis of 174 consecutive admissions of individuals seeking outpatient treatment for cocaine abuse at one of three community based treatment sites. Two sites were located in Hartford, CT, and one was in Springfield, MA. All clinics had intensive outpatient substance abuse treatment programs and served primarily uninsured and General Assistance populations. Patients were beginning their participation in research studies evaluating contingency management interventions for cocaine use disorders. All patients self-reporting cocaine use at the clinical intake evaluation were offered the opportunity to participate in the study. Of the 202 patients who were approached for the study, only 28 (13.8%) refused participation or were deemed ineligible following the study evaluation. Thus, these data are likely representative of cocaine abusers initiating treatment at these sites. The University of Connecticut Health Center Institutional Review Board approved the study, and all patients signed written, informed consent. Patients were not compensated for completion of the study intake evaluation.

Inclusion criteria for the studies were English speaking, age 18 years or older, and recent cocaine use as indicated by self-report or urinalysis result. Using items from the Structured Clinical Interview for DSM-IV (First, Spitzer, Gibbon, & Williams, 1996), 87.4% of patients met criteria for cocaine dependence. Exclusion criteria were inability to comprehend the study as determined by Mini Mental Examination (Folstein, Folstein, & McHugh, 1975) scores of less than 23, or acute psychosis or suicidality.

2.2. Procedures

The instruments described below were administered as part of the study intake procedures at all three treatment sites, and these interviews occurred within 2 days of initiating outpatient treatment. The interviews were conducted by bachelor level research assistants who received formal interview training and conducted at least five supervised interviews prior to starting the study. Interviews were spot-checked monthly, and any discrepancies or drifts were corrected.

The Addiction Severity Index (ASI; McLellan et al., 1985) is a standardized clinical interview providing past month composite ratings regarding severity of problems in areas commonly affected by addictive disorders: alcohol use, drug use, legal status, psychiatric symptoms, employment, and family/social functioning. Responses to items within each area yield composite scores, ranging from 0.00 to 1.00, with higher scores reflecting increased severity. The ASI is one of the most commonly used clinical instruments in addiction populations, and its reliability and validity has been demonstrated in a variety of studies of

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