



McGovern Medical School
Psychiatry and Behavioral Sciences

CNRA CONNECTIONS

The official newsletter of the
Center for Neurobehavioral Research on Addiction
Department of Psychiatry

HEARTS@UTHealth reaches the Houston community

Adrienne Thomas, PhD

Despite the known health and social consequences of addiction, many who need treatment still do not get it. Some reasons for this include the lack of available services, difficulty in finding treatment that is culturally inclusive, and the stigma associated with substance use disorders treatment among some populations.

To address concerns in the Houston community, Angela Heads, PhD developed HEARTS@UTHealth, a program funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), to provide HIV prevention and SUD treatment for underserved populations in the Houston area.



The goal of HEARTS@UTHealth includes decreasing the incidence of substance use and new diagnoses of HIV and Hepatitis C (HCV) viral infections among racial/ethnic, sexual, and gender minorities. Individuals who engage in substance use and risky sexual behaviors, and individuals with co-occurring mental health conditions are at greater risk for acquiring HIV or HCV infections.

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HIV
Education
Awareness
Referral and
Treatment for
Substance Use Disorders



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Engaging at-risk individuals in treatment for substance use while addressing the factors that place them at risk helps them make improvements in overall health and well-being. HEARTS@UTHealth, counseling, risk reduction, and case management services are offered to improve decision-making and reduce adverse health and social consequences related to substance use.

HEARTS@UTHealth clinicians provide evidence based interventions including Motivational Interviewing, Cognitive Behavioral Therapy (CBT), Seeking Safety, and Medication Assisted Treatment (MAT). Motivational Interviewing focuses on helping people set goals and address ambivalence often associated with behavioral change.

CBT and Seeking Safety are used to help individuals develop coping skills and increase resiliency as they strive to reach their goals. MAT is provided by Michael Weaver, MD for clients with opioid use disorders and alcohol use disorders who could benefit from treatment with FDA approved medications but do not have a means of obtaining the medication.

HEARTS@UTHealth also provides HIV and Hepatitis education to reduce the risk of new HIV/HCV infections among racial/ethnic, sexual, and gender minority adults. Therefore, free screening for HIV and HCV is provided, as well as a combined Hepatitis A and B vaccination. Individuals aware of their status can be reconnected to care with medical providers who provide treatment for individuals with HIV or Hepatitis.

For more information on HEARTS@UTHEALTH
call 713-486-2736



1 IN 10

**PEOPLE WHO NEED
TREATMENT RECEIVE IT.**

Psychologist, Angela Heads PhD, and counselors Nina Moak, Kathryn Tipton, Carly Malcolm-Hoang and Program Coordinator, Adrienne Gilmore-Thomas, PhD provide counseling services to clients of HEARTS@UTHealth. Counselors described the work as challenging yet rewarding. Staff of the HEARTS@UTHealth program enjoy being able to share success stories from their work with clients.

SUCCESS

“Jake” reported a 20-year history of addiction and believed “therapy wouldn’t help” him. Initially, his attendance was sporadic, partially due to being homeless. Gradually, Jake learned to trust the therapist and began openly discussing his struggle with addiction. Through the course of therapy Jake achieved sobriety for the first time in his life since his struggle with addiction began. He quit using drugs and secured housing and employment. He attributes his success to HEARTS@UTHealth and recommends the program to others who are struggling with addiction. He continues to check in with his counselor occasionally to say hello. According to HEARTS@UTHealth counselor, Nina Moak, “It is very rewarding to see the clients make progress through treatment and to start to lead healthier lives.”

About CNRA

MISSION

To develop evidence-based treatment for substance use disorders (SUDs) using decisions informed by behavioral neurosciences.

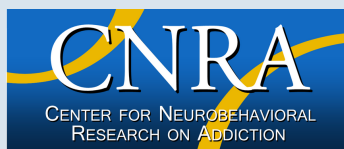
AIMS

In pursuit of this mission the CNRA aims to:

- Map out the neurological, behavioral, and clinical mechanisms that contribute to drug addiction
- Target key mechanistic processes in the development of SUD treatment
- Evaluate treatment efficacy using innovative clinical trial designs and statistical methods

Core & Affiliated Faculty

Charles Green, PhD
Angela Heads, PhD
Scott Lane, PhD
Austin Lin, MD
Joy Schmitz, PhD
Angela Stotts, PhD
Robert Suchting, PhD
Anka Vujanovic, PhD
Michael Weaver, MD
Luba Yammine, PhD
Jin Yoon, PhD



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CNRA: IN THE MEDIA

- On September 1st, **Michael Weaver, MD**, did an interview on alcohol effects for FOX 26 news.
- On December 11th, **Michael Weaver, MD**, was interviewed by a Kaiser Health News writer about a UTHHealth clinical trial that is studying a combination of medications to treat methamphetamine use.
- **Joy Schmitz, PhD**, was elected to serve on the Board of Directors of the Cenikor Foundation and Chair of the Quality Assurance Committee.
- On August 20th, **Joy Schmitz, PhD**, was quoted in a front-page Houston Chronicle story about a rise in deaths from drug overdoses.
- **Jin Yoon, PhD**, was featured guest speaker during the October Monthly North Harris County Substance Abuse Prevention Coalition Meeting.
- On May 2nd, **Jin Yoon, PhD**, was interviewed by Fox 26 news regarding the FDA warning companies to stop misleading e-cigarette advertisements targeting kids.
- In December, CNRA participated in the Dress for Success clothing drive for Open Gate.

CNRA and HEARTS @UTHealth participated in the Change Happens Project Force – World AIDS Day Event on Saturday, Dec. 1.



Adrienne Thomas, Nina Moak, & Halle Ross at World AIDS Event

The CNRA hosted a booth on “Brain on Drugs” at the 6th annual UTHHealth Stomp Out Stroke Festival on Saturday, Apr. 28, 2018 at Discovery Green.



CNRA's "Brain on Drugs" Booth



Angela Heads, PhD, received a new 3-year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to create a training program for residents, medical students and nurse practitioners in medication assisted treatment for opioid use disorders (Provider Clinical Support System at UTHealth (UT-PCSS)). As Principal Investigator, Heads will lead this effort with training provided by CNRA addiction physicians, Michael Weaver, MD, and Austin Lin, MD.

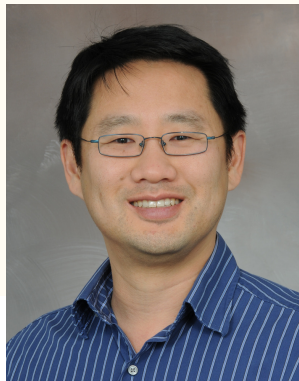


Joy Schmitz, PhD, will chair a workshop on “Reaching Underserved Smokers: New Strategies and How to Implement Them” at the College on Problems of Drug Dependence (CPDD) 81st Annual Scientific Meeting in June 2019 in San Antonio, TX. Presenters will include CNRA members **Luba Yammine, PhD**, (“Using Mobile Dental Clinics to Deliver Tobacco Cessation Treatment to Rural Smokers”) and **Angela Stotts, PhD**, (“Reducing Tobacco Smoker Exposure in NICU Infants’ Homes”). Other invited speakers will include Karen Cropsey, PsyD, from the University of Alabama at Birmingham, Jennifer Vidrine, PhD, from the Stephenson Cancer Center and Department of Family & Preventive Medicine, University of Oklahoma Health Sciences Center, Mary Brunette, MD, from the Geisel School of Medicine at Dartmouth, and Stephen Higgins, PhD, from the Vermont Center on Behavior and Health, University of Vermont.



Scott Lane, PhD, and Consuelo Walss-Bass, PhD, received a new research grant from the McManus Foundation, entitled “In vitro and in vivo evidence of neurotoxicity in substance abuse”.

Jin Yoon, PhD, received a new research grant from UTHealth Department of Psychiatry Pilot Grant funding, entitled “Effects of pioglitazone on stress reactivity and alcohol craving.”



AWARDS RECOGNITION & HONORS

Schmitz and **Walss-Bass** received a Supplement Award to their parent grant from the National Institute on Drug Abuse (NIDA R01 DA044859). Walss-Bass will lead this new project on DNA methylation in our postmortem brain cohort of addiction subjects.

National Recovery Month

Prevention Works • Treatment is Effective • People Recover

september 2018

This past September, in recognition of National Recovery Month, the CNRA faculty presented a special departmental Grand Rounds entitled “Addiction Recovery: It Works If You Work It”. Panel talks were given by Angela Heads, PhD; Austin Lin, MD; Michael Weaver, MD; and Joy Schmitz, PhD. In case you missed it, the take-home points are summarized below.

Prevention as Recovery: Trauma Informed Approaches

Angela Heads, PhD

It is estimated that by the year 2020, mental and substance use disorders will surpass all physical diseases as a major cause of disability worldwide. In that context, the goal of preventing or reducing the risk of developing an addiction becomes tremendously important.

The numbers show that a \$1 investment in prevention programs results in savings of \$2 to \$10 in costs related to health care, criminal justice and lost productivity.

We know some of the characteristics that make people vulnerable or resistant to substance use problems. For example, risk factors include earlier age of first use of alcohol and

childhood trauma. Protective factors include positive self-image and social connectedness.

Risk and protective factors for substance use and mental health overlap. Among the patients seen at the HEARTS@UTHealth Program (see related article on page 1), 68% report having experienced violence or trauma, with most reporting current PTSD symptoms of nightmares, avoidance, being constantly on guard, and feeling numb or detached.

Effective interventions that address these co-occurring conditions are the key to prevention and recovery.

"A \$1 investment in prevention programs results in savings of \$2 to \$10 in costs related to health care, criminal justice and lost productivity."



Pharmacotherapy Overview for Substance Use Disorders

Austin Lin, MD

Addiction became medicalized in the 20th century as an entirely material phenomenon traceable to biological disruptions, which in turn are amenable to biomedical treatment approaches, most commonly pharmacotherapy.



For the treatment of alcohol use disorders, there are several FDA-approved medications, including disulfiram (Antabuse) based on aversion therapy; acamprosate (Campral) shown to reduce alcohol intake; and naltrexone (ReVia, Vivitrol) used to reduce alcohol cravings and euphoria from alcohol use.

Individuals with an opioid use disorder can be treated effectively with methadone from federally regulated facilities; however, this protocol requires frequent visits. An alternative is the medication buprenorphine (Suboxone) in an office-based setting. Naltrexone (Vivitrol) is another effective treatment that works by completely blocking opioid receptors in the brain.

For tobacco use disorder, the main pharmacotherapies include nicotine replacement products (gum, patches, lozenges), varenicline (Chantix), and bupropion (Zyban).

Unfortunately, there are no FDA-approved medications for the treatment of cannabis or stimulant (cocaine, methamphetamine) use disorders, however promising off-label pharmacotherapies can be used.

Recovery with Self-Help Groups

Michael Weaver, MD

Twelve Step has been the longest standing, no cost, group self-help program.

Different groups have different personalities, with newer groups available for older adults (“Gray AA”), health care professionals (“Caduceus”), airline pilots (“Birds of a Feather”), women-only and non-smokers.

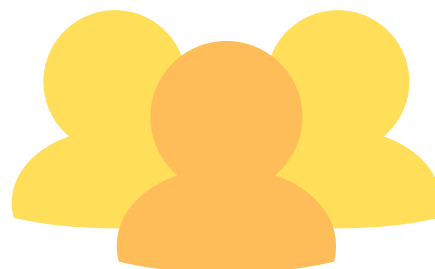
For family members of someone with an addiction, Al-Anon and Nar-Anon groups are available. Success with 12-Step is associated with number of groups attended, with two meetings per week recommended.

Self-Management and Recovery Training (SMART), is an alternative group to 12-step, based on cognitive behavioral therapy and motivational

interviewing. Attending an online SMART recovery meeting is a popular option for many individuals.

Treatment providers are encouraged to remind their patients to try several different meetings before giving up and to do more than just attend meetings – start a phone list and find a sponsor.

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Seeking Safety: Q&A

The HEARTS@UTHealth program delivers evidence-based psychotherapy to individuals with addiction and related disorders. For many clients who have been exposed to trauma and also have substance use problems, Seeking Safety is an effective treatment option.

What is the Safety stage of therapy about?

Seeking Safety is based on five central ideas (1) safety is the priority; (2) treatment for PTSD and substance use are integrated; (3) a focus on ideals; (4) focus on four major content areas (cognitive, behavioral, interpersonal, and case management); (5) attention to therapist processes (Najavits, 2002).

The most urgent need is to establish safety. This includes discontinuing substance use, letting go of dangerous relationships, reducing risk for HIV infection, stopping self-harm behaviors and reducing suicidality. The focus on safety is a key component to every session.

Does Seeking Safety include exposure to past trauma?

No, Seeking Safety does not include exposure work. In order to successfully engage in exposure work, it is recommended that substance users have a period of abstinence and functional stability.

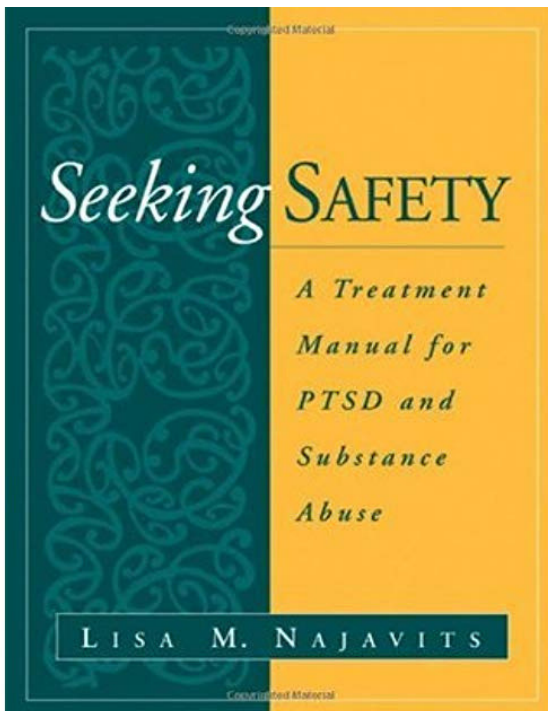
Some individuals may become overwhelmed by trauma-related memories and it is necessary to have appropriate coping skills in place to manage the emotions associated with these memories. Substance users who are not adequately prepared to manage these emotions may increase their substance use in a maladaptive attempt to cope with their feelings.

Addressing trauma via exposure methods may be helpful in later stages of treatment once safe coping skills have been established and maintained. Establishing safe coping is a primary focus of Seeking Safety.

What "grounding skills" are taught in Seeking Safety?

Grounding is a strategy that can help clients to detach from emotional pain. The goal is to shift attention away from negative and overwhelming feelings. Seeking Safety focuses on three major categories of grounding - mental, physical, and soothing grounding.

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Mental grounding involves focusing on the mind; physical grounding involves focusing on the senses; and soothing grounding involves engaging in kind conversation with oneself which can include activities such as making positive statements, thinking of favorite things or focusing on inspirational songs or quotations.

What type of Case Management needs are addressed in Seeking Safety?

Case management is an important component of Seeking Safety. During an early session, the therapist completes a case management assessment to identify the needs of the client. Areas assessed include housing, health care, HIV testing, transportation, employment, etc. Once needs are clearly understood, the therapist works with the client to identify community resources. Seeking Safety is an empowering intervention. Therefore, the client is encouraged to contact resources themselves as part of their weekly Commitment to Recovery. The counselor works with the client to identify emotional and practical obstacles that may interfere with the client completing their case management goals.

The Role of Cognition in Addiction and Recovery

Joy Schmitz, PhD

According to the brain disease model of addiction, drugs of abuse act upon prefrontal regions of the brain that control cognitive processes of memory, learning, motivation, inhibitory control and other executive functions.

The so-called “addicted brain” reveals cognitive deficits that correlate with years of use and predict poorer treatment outcome. Targeting cognition has become an important focus of treatment development research.

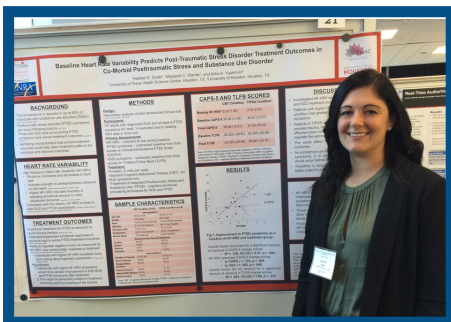
A recent study at the CNRA tested the neuroprotective agent, pioglitazone, as a potential treatment for cocaine use disorder. In a sample of 30 patients, half received pioglitazone for 12 weeks of treatment, and the other half received placebo treatment. Diffusion tensor imaging (DTI) brain scans were performed on all subjects before and after treatment.

For those receiving 45 mg of pioglitazone daily, significant improvement in brain white matter was found, compared to no improvement in the group of patients who received placebo. White matter is a brain structure that is critical for efficient cognitive functioning.

CNRA researchers are hoping to start the next phase of this research to determine whether pioglitazone, by improving brain structure, will lead to cognitive enhancement and relapse prevention in recovering patients with cocaine use disorder.

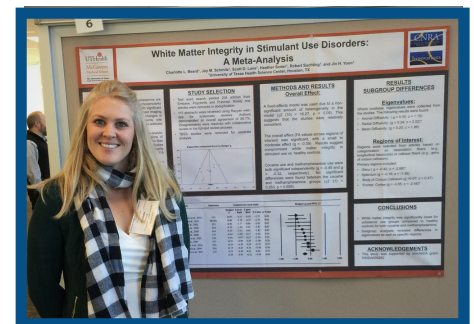
2nd Annual Alcohol and Addiction Research Symposium

Several CNRA faculty participated in the 2nd Annual Alcohol and Addiction Research Symposium on November 16th, sponsored by the Gulf Coast Consortia (GCC). **Scott Lane, PhD**, assisted as co-director of the Symposium. **Angela Heads, PhD**, delivered an invited talk, entitled “Opioid Misuse Risk in Trauma Patients.”



Heather Soder, PhD

Posters were presented by **Heather Soder, PhD**, “Resting Heart Rate Variability Predicts Posttraumatic Stress Disorder Treatment Outcomes in Adults with Co-Occurring Substance Use Disorders and Posttraumatic Stress” and **Charlotte Beard, MS**, “A Meta-Analysis of Regional Differences in White Matter Integrity in Stimulant Use Disorders.”



Charlotte Beard, MS

NEW FACES AT THE CNRA

Charlotte Beard, MS, is a psychology intern from Palo Alto University, California where she is completing her doctoral degree in Clinical Psychology. She completed a four-month rotation with CNRA from July-October. Clinically, she conducted assessment and individual therapy with patients in the HEARTS program and the INNOVATIONS Addiction clinic. She is the primary investigator on a CNRA research project involving the meta-analysis of diffusion tensor imaging studies of white matter integrity in stimulant use disorders.

Sarah Jensen, BS, joined CNRA as a research assistant to work on the Accelerated Development of Additive Pharmacotherapy Treatment for Methamphetamine Use Disorder study and other non-treatment behavioral laboratory protocols. She is completing her Masters of Science degree in Behavioral Neuroscience at the University of Houston at Clear Lake.

Shweta Kapoor, MD, is currently a third-year research track psychiatry resident at McGovern Medical School at UTHealth. She completed medical school at Kasturba Medical College in India, then went on to obtain a PhD in Clinical Health Psychology at the University of Alabama, followed by postdoctoral training at Emory University School of Medicine. She is interested in research on psychosocial factors affecting chronic pain and opioid use and has taken the lead on a current CNRA study involving the assessment of opioid risk factors in post-surgical trauma patients the Memorial Hermann Hospital.



Austin Lin, MD, is an assistant professor and board-certified physician in Psychiatry and in Addiction Psychiatry. He is a graduate of St. George's University School of Medicine and completed an adult psychiatry residency at Harvard South Shore Psychiatry Residency Program, followed by an Addiction Psychiatry fellowship at the University of Texas Southwestern Medical Center. He spends 50% at the CNRA providing medical coverage for patients in the methamphetamine clinical trial and the INNOVATIONS Addiction Clinic.

Congratulations Dr. Austin Lin on becoming board certified in Addiction Psychiatry!

Halle Ross, MS, is a psychology intern from Baylor University in Waco, TX, where she is completing her Doctor of Psychology degree (PsyD). She is completing a four-month rotation with CNRA from November-February. She has been trained on several manual-based therapy protocols, including Drug Counseling, Cognitive Behavioral Therapy, and Seeking Safety. In addition to managing a caseload of individual patients, Halle is involved in the assessment of new patients during screening and intake.

Niloofer Tavakoli, MA, is a dual research assistant and counselor at the CNRA. Prior to working at the CNRA, Niloofer completed her Master's degree in Counseling Psychology at the University of Houston where she worked as a graduate research assistant on several projects. Clinically, she is a trained therapist in Acceptance and Commitment Therapy (ACT) and delivers ACT as part of the Developing Adaptive Interventions for Cocaine Cessation and Relapse Prevention study at CNRA.

Adrienne Gilmore-Thomas, PhD, recently joined CNRA as the Program Coordinator of the HEARTS @UTHealth project. Thomas received her doctorate degree in Clinical Adolescent Psychology from Prairie View A&M University. Prior to joining CNRA, she provided psychological evaluation services at the Houston Counseling and Outreach Program. Thomas works closely with the community agencies that partner with the HEARTS @UTHealth, including Change Happens, the Association for the Advancement of Mexican Americans, and Legacy Community Health.

RESEARCH UPDATE

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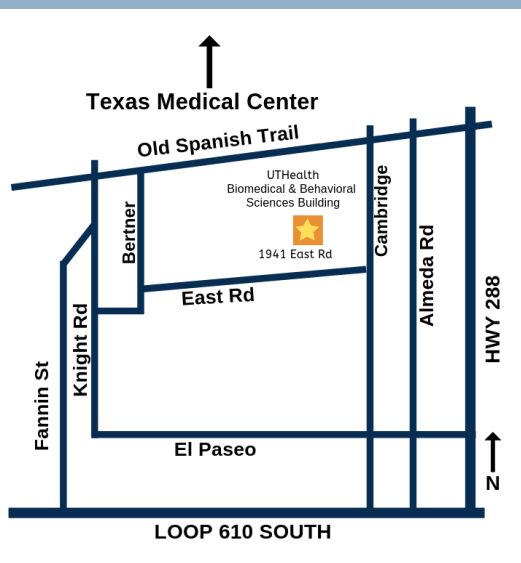
Explore the CNRA

The CNRA currently has two ongoing studies of treatment for stimulant use disorders.

- Developing adaptive interventions for cocaine cessation and relapse prevention
- Accelerated Development of Addictive Pharmacotherapy Treatment (ADAPT-2) for Methamphetamine Use Disorder

CNRA Program Features

- No Cost Treatment
- 100% confidential
- Medical & Behavioral Treatments
- Experienced and Professional Staff
- Safe and Clean Atmosphere
- Free Parking and Metro Tickets
- Financial Compensation for Research Participation
- Funded by the National Institute on Drug Abuse (NIDA)



Appointments

713-500-DRUG [3784]

Clinic Hours:

Monday – Friday 7:30-4:00

Behavioral and Biomedical Sciences Building

1941 East Road

Houston Texas 77054

<https://med.uth.edu/psychiatry/research/centers/addiction/>