
https://arctichealth.org/en/permalink/ahliterature99797

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Source: Eur Addict Res. 2010 Dec 17;17(2):90-96

Date: Dec-17-2010

Language: English

Publication Type: Article

Abstract: Aim: This study aimed to survey the changes in alcohol habits during a period with the European Union legal practices. Methods: Alcohol habits in Sweden were surveyed in the general Swedish population at four timepoints, in 1997, 2001, 2005 and 2009, using the 10-item AUDIT questionnaire. Design: Four separate randomly drawn cross-sectional samples of 1,250 individuals were surveyed at each timepoint. Results: An average of 70% of the sampled individuals responded to the AUDIT questionnaire. Men had higher total AUDIT scores than women in 2005 and 2009, but scores increased among women 61-71 years old and decreased among men 61-71 years old. Younger men and women 17-27 years old decreased their AUDIT-C consumption scores by almost 20% between 2005 and 2009. An analysis of problem drinkers (+8 for men/+6 for women) indicated that a larger proportion of elderly women drank moderately in 2009 compared with 2005, but fewer elderly women drank hazardously. Conclusions: Earlier increases in drinking levels between 1997 and 2001 may reflect a latent high demand that was restricted by low availability. When availability due to European Union harmonization increased, alcohol consumption followed suit. After a period of adaptation, alcohol consumption appears to have stabilized.

PubMed ID: 21178356 View in PubMed 📌
Alcohol use among Swedes and a psychometric evaluation of the alcohol use disorders identification test.
https://arctichealth.org/en/permalink/ahliterature9980

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Source: Alcohol Alcohol. 2002 May-Jun;37(3):245-51

Language: English
Publication Type: Article

Keywords: Adolescent
Adult
Aged
Alcohol Drinking - epidemiology - psychology
Alcohol-Related Disorders - epidemiology - psychology
Analysis of Variance
Comparative Study
Female
Humans
Male
Middle Aged
Psychometrics
Questionnaires
Research Support, Non-U.S. Gov't
Sweden - epidemiology

Abstract: The Alcohol Use Disorders Identification Test (AUDIT) was completed by 997 persons randomly selected from the general Swedish population (80% response rate). Eighteen per cent of the men and 5% of the women had hazardous or harmful alcohol use according to the > or =8 score criterion. AUDIT scores decreased with increasing age in both genders. Women are more sensitive to alcohol than men and when the cut-off score was set to > or =6, the female prevalence of hazardous or harmful alcohol use increased to nearly 11%. The 'binge drinking' question explained half of the total AUDIT variance and is thus the best item indicator of hazardous or harmful alcohol use in the test. Confirmatory and exploratory factor analyses revealed two AUDIT basic factors, the first three items defining a 'hazardous consumption' factor and the other seven items an 'alcohol-related problems' factor. Both the internal and test-retest reliability of the Swedish version of AUDIT were satisfactory. A table for converting raw scores to non-normalized T-scores for each combination of gender and three age intervals is presented.

PubMed ID: 12003912 View in PubMed

Fetus at risk: prevalence of alcohol consumption during pregnancy estimated with a simple screening method in Swedish antenatal clinics.
https://arctichealth.org/en/permalink/ahliterature9590

Fetus at risk: prevalence of alcohol consumption during pregnancy estimated with a simple screening method in Swedish antenatal clinics.
AIMS: Maternal alcohol consumption is a major health hazard for the fetus. Sweden has an extensive system of public antenatal care clinics, whose mission is to detect and prevent this type of health hazards. However, very few cases of alcohol consumption during pregnancy are detected. The aim of this study was to examine the prevalence of hazardous or harmful alcohol consumption during pregnancy in a consecutive series of Swedish pregnant females. DESIGN, SETTING, PARTICIPANTS AND MEASUREMENTS: The Alcohol Use Disorders Identification Test (AUDIT) was used to collect anonymous data from consecutive pregnant subjects admitted during 1 year to an antenatal clinic in Stockholm, and signing up for parental education offered routinely (n = 1327). Data were obtained from 1101 subjects, typically in pregnancy week 30. A complete AUDIT form was filled out referring to alcohol use during the year prior to pregnancy. A separate form with the consumption items from AUDIT was filled out to report behaviour during pregnancy. FINDINGS: For the year preceding pregnancy, 17% of subjects reported AUDIT scores of 6 or higher, indicating hazardous or harmful alcohol use in women. Few individuals reported scores of 13 or higher (indicating abuse or dependence), but almost half the subjects (46%) reported binge drinking (six standard drinks on a single occasion) once/month or more often, and 6% reported binge drinking on every occasion of alcohol consumption. One-third of the subjects (30%) continued regular alcohol use during pregnancy, and 6% reported consumption two to four times/month. In a logistic regression model, AUDIT scores for the year prior to pregnancy and subject age, but not education level were significant predictors of continued alcohol use during pregnancy. CONCLUSIONS: Alcohol use during pregnancy is more extensive than has been presumed in Sweden. Simple, clinically useful screening methodology detects hazardous consumption during pregnancy in a manner which regular antenatal care does not. If this methodology can be shown to have similar sensitivity when administered under non-anonymous conditions, it should be made part of routine antenatal care.
Hospitalization and mortality succeeding drunk driving and risky driving.

https://arctichealth.org/en/permalink/ahliterature9741

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Source: Alcohol Alcohol. 2003 May-Jun;38(3):281-6

Language: English

Publication Type: Article

Keywords: Accidents, Traffic - mortality - statistics & numerical data
          Alcoholic Intoxication - mortality
          Automobile Driving - statistics & numerical data
          Hospitalization - statistics & numerical data
          Humans
          Reproducibility of Results
          Research Support, Non-U.S. Gov't
          Risk
          Risk-Taking
          Sweden - epidemiology

Abstract: AIMS: The association between drunk driving (DD) and/or risky driving (RD) offences and subsequent hospitalization and mortality was studied during a 25-year period. METHODS: Information about drinking habits and psychosocial factors for the 8122 conscripts from Stockholm County in 1969-1970 was linked to register data on hospitalization, mortality, DD and RD. RESULTS: Analyses comparing background characteristics of DD and RD groups showed that the prevalence of problem behaviour and drug use was highest in the RD group. The relative risk (RR) for hospitalization after DD and/or RD was significantly elevated in multivariate logistic regression analysis for all the studied diagnostic categories (alcohol diagnoses, narcotic diagnoses, suicide attempts, psychoses, E-codes, all diagnoses), and was especially high for alcohol (RR = 7.2) and diagnosis of drug misuse (RR = 9.2). The RR of all hospitalization was 1.5 for the DD group, 1.8 for the RD group, and 1.9 for those who had been sentenced both for drunk driving and risky driving (DRD), all of which were significantly increased. The RR of death was significantly elevated in all three groups. CONCLUSIONS: The results show a significantly increased risk of hospitalization and mortality both in the DD and the RD group. From a public health and traffic safety perspective, this implies a need for developing and implementing better prevention strategies.

MR volumetry during acute alcohol withdrawal and abstinence: a descriptive study.

https://arctichealth.org/en/permalink/ahliterature9813
AIMS: The brain volume of chronic drinkers is known to partially recover with abstinence from alcohol. To investigate the relative contribution of grey and white brain matter to this process, magnetic resonance imaging and brain tissue segmentation was used to study brain tissue in acute alcohol withdrawal and abstinence in seven alcohol-dependent men. METHODS: The patients were studied on three occasions; within 48 h after the last drink and approximately one month and two and a half months later. Total brain tissue class volumes [grey matter (GM) and white matter (WM) and cerebrospinal fluid (CSF)] were measured. Eleven healthy volunteers were scanned twice to serve as a control group. The alcohol-dependent patients were investigated with regard to drinking variables, neuropsychological performance and blood biochemistry. RESULTS: In the alcohol-dependent patients, intracranial volume and total GM volume did not change between scan occasions, except in a single patient who demonstrated a GM increase of 4.8% (4.2% relative volume) between scans 2 and 3. For all patients, the increase in total WM volume ranged between 1.9 and 22.4% (absolute volumes) and 2.1 and 21.2% (relative volumes). Between scans 2 and 3, the increase in total WM volume ranged between 0.3 and 13.2% (absolute volumes), and between 1.5 and 14.0% (relative volumes). One patient resumed drinking and was investigated a second time during acute withdrawal. In this patient, the measured decrease of 8.1 and 8.5% of absolute and relative WM volumes corresponded to the size of the volume increase between scans 1 and 2. CSF, GM and WM volumes in the healthy subjects were constant over time. CONCLUSIONS: The results demonstrate that changes in brain volume during short-term abstinence in chronic alcohol-dependent patients are confined to the WM. The time limit of WM volume restitution is variable and continues longer than 3 weeks after withdrawal.

NURR1 promoter polymorphisms: Parkinson's disease, schizophrenia, and personality traits.

https://arctichealth.org/en/permalink/ahliterature184854

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Date: Jul-1-2003

Language: English

Publication Type: Article
Abstract: We have previously identified mutations in exon three in NURR1 (NR4A2) in two patients with schizophrenia (SZ) and one patient with bipolar disease with psychotic symptoms. In the present study we analyzed the promoter region of NURR1 and identified five polymorphic sites: three were found to be in strong linkage disequilibrium with a previously identified polymorphic site in the sixth intron. One polymorphism of this haplotype and the two other independent polymorphisms were investigated for their possible association with SZ and Parkinson’s disease (PD) by comparing their frequencies in a Swedish material consisting of 134 subjects with SZ and 207 matched controls and 108 subjects with PD and 125 matched controls. Exon 1 was also investigated in our Parkinson and control material but no variances were found. The distributions of the two most informative polymorphisms in the promoter were investigated in an American material as well consisting of 141 subjects with SZ and 139 matched controls. Furthermore, the identified markers were screened for association with putative endophenotypes of SZ in the Swedish material. The distribution of sequence variants among the Swedish controls matched for SZ was investigated with regard to personality. No significant genotype or allelic association of the three sequence variants with SZ or PD was found. Several comparisons regarding endophenotypes or personality indicated association at the 5% confidence level, although correction for multiple testing rendered none of these findings significant. We conclude that the identified polymorphic sites in the human NURR1 are unlikely to be involved in conferring susceptibility for SZ or PD in our patient material.
Internationally, the NEO Personality Inventory-Revised (NEO-PI-R) is a well established questionnaire for assessment of personality in accordance with the Five Factor Model. The instrument has been translated into many languages including Swedish.

The aim of this study was to make a psychometric evaluation of the Swedish version of NEO-PI-R based on a sample from the general population.

Postal questionnaires were sent to a random sample of 1250 persons (n = 766 responders). The test showed satisfactory internal consistency in the broad factors as well as the facets. A factor analysis indicated that the factors were similar but not identical to those obtained in American studies. In sum, The Swedish version of the NEO-PI-R shows satisfactory psychometric properties and the instrument will continue to be a valuable tool in psychological research and in clinical practice.
AIMS: To investigate psychosocial characteristics and problems of a representative sample of Swedish drunk drivers with special consideration of the gender of the driver; analyze criminal records of the drivers before and after enrollment in the study; identify psychosocial predictors of relapse to drunk driving. METHODS: Psychosocial characteristics were assessed by the Addiction Severity Index (ASI). Alcohol problems were additionally assessed by the Alcohol Use Disorders Identification Test (AUDIT). Criminal records were collected for the five year period before the enrollment, and for the subsequent two years, from Sweden’s official crime statistics. RESULTS: About half of the investigated drivers had other psychosocial problems besides the drink driving offence. Female drivers had more alcohol, drug, psychiatric and relational problems, including with parents when growing up, than male drivers, but less previous and subsequent criminality. Heavily drunk drivers (blood alcohol concentration ≥ 0.1%) had more problems with alcohol, legal status and employment and support than the other drunk drivers. Problems with legal status, family and social relations and alcohol use increased the risk of relapse in drunk driving, while medical problems seemed to be a protective factor. Different ASI risk factors were identified for relapse in either traffic offences or other crimes. CONCLUSIONS: As well as the drunk driving offence, drunk drivers often have other psychosocial problems, female drivers in particular. Already the blood alcohol concentration per se gives some indication of the psychosocial problem profile of a drunk driver and the ASI profile has some prognostic value for relapse in drunk driving.
[Swedish women have developed more risky and more harmful alcohol drinking habits. A survey of alcohol drinking changes among Swedes between 1997-2001]

https://arctichealth.org/en/permalink/ahliterature9752

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Source: Lakartidningen. 2003 Mar 20;100(12):1028-30, 1033-5
Date: Mar-20-2003
Language: Swedish
Publication Type: Article
Keywords: Adolescent
Adult
Aged
Alcohol Drinking - adverse effects - psychology - trends
Alcohol-Related Disorders - diagnosis - epidemiology - etiology
Comparative Study
English Abstract
Female
Humans
Male
Middle Aged
Prevalence
Questionnaires
Risk factors
Sex Factors
Sweden - epidemiology
Women's health

Abstract: A random sample of 1,250 persons from the general Swedish population responded to the Alcohol Use Disorders Identification Test, AUDIT. The results (72.5% response rate) were compared to the results from an identical survey made 1997 (79.8% response rate). The factor structure and the internal reliability showed good correspondence with those of 1997, indicating a stable and satisfactory psychometric quality of the Swedish AUDIT version. The female prevalence of hazardous or harmful alcohol use had increased from 11 to 15 percent between 1997 and 2001. Thus, women, particularly 28-38 years old, reported drinking more often and in greater amounts. Furthermore, the prevalence of female teetotallers had decreased from 18 to 13 percent. The corresponding trends among men were not significant but might have been underestimated due to a greater dropout, particularly among young men in the year of 2001.

PubMed ID: 12693135 View in PubMed

Two NOTCH4 polymorphisms and their relation to schizophrenia susceptibility and different personality traits.

https://arctichealth.org/en/permalink/ahliterature9785
BACKGROUND: Recently, linkage disequilibrium mapping of the major histocompatibility complex region on the short arm of human chromosome 6 suggested that the NOTCH4 locus is highly associated with schizophrenia.

OBJECTIVES AND METHODS: We analysed two polymorphisms in this gene in Swedish schizophrenic patients (=74) and control subjects (=135). The NOTCH4 variants were also analysed in schizophrenic patients with regard to subdiagnosis, age at first hospitalization, abuse/dependence of alcohol, solvents, or drugs, previous suicide attempts, extrapyramidal symptoms, treatment with anticholinergic drugs, and response to anti-psychotic drug treatment. Control subjects were scrutinized with regard to personality, another partially heritable trait suggested being of importance in schizophrenia. In addition, two intermediate endophenotypes suggested being of importance in schizophrenia, dopamine D(2) receptor density in striatum and monoamine metabolites in cerebrospinal fluid, respectively, were investigated with regard to the two NOTCH4 variants. RESULTS: There was no significant association between the patients and the controls for the two investigated polymorphisms neither for the parameters analysed in the schizophrenia material. The NOTCH4 SNP2 variant, an A-->G substitution, was associated with the Karolinska Scales of Personality Irritability scale. The NOTCH4 (CTG)(n) variant was associated with the revised NEO personality inventory Extraversion and Activity (E4) scales. However, after correction for multiple testing, no difference remained significant. The results for the endophenotypes and the polymorphisms were non-significant. CONCLUSIONS: The present study does not support that the investigated NOTCH4 variants have a major influence on susceptibility to schizophrenia or related neurobiological traits.

PubMed ID: 12605097 View in PubMed