

# Relationship Between Stress and Substance Use Disorders: Neurobiologic Interface

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# Thanks to My Colleagues and NIH



# Traumatic Exposure Common in the Lives of Individuals with SUDs



# Clinical Evidence for Stress-Relapse Connection

- Intuitive appeal, but methodologic issues
  - Definition of stressor
  - Causal relationship difficult to establish
- Childhood adverse events strongly associated with SUD's
- PTSD, mood/anxiety disorders strongly associated with SUD's

# PTSD and Substance Use Disorders

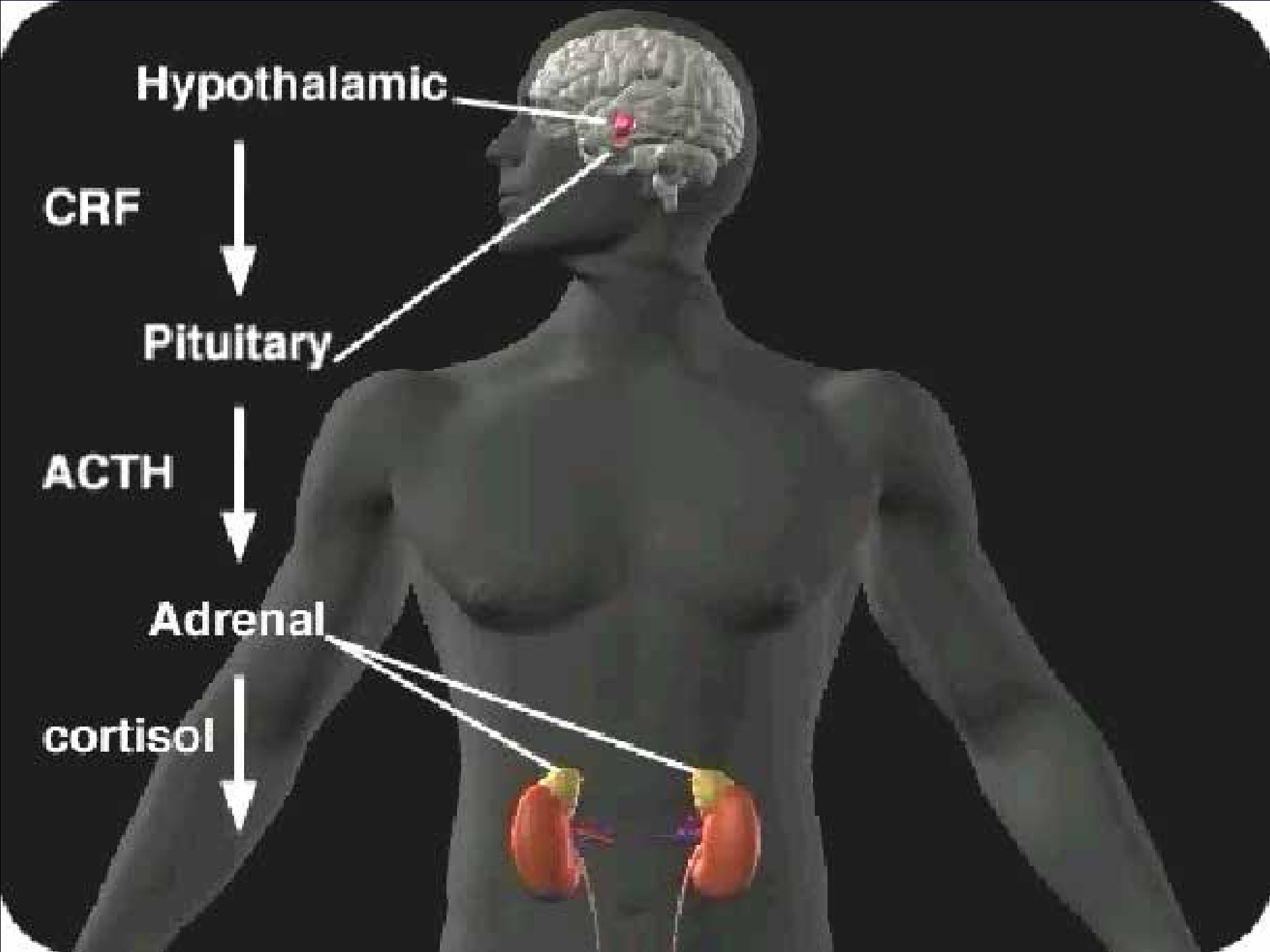
- Treatment seeking individuals
  - **PTSD** - 30-40 % have substance use disorders
    - maybe higher in combat-related PTSD
  - **Substance use samples** - 20-60% have PTSD -  
higher in women, cocaine/opiate users
- Epidemiologic data
  - Significantly increased odds ratios

# Non-Random Association

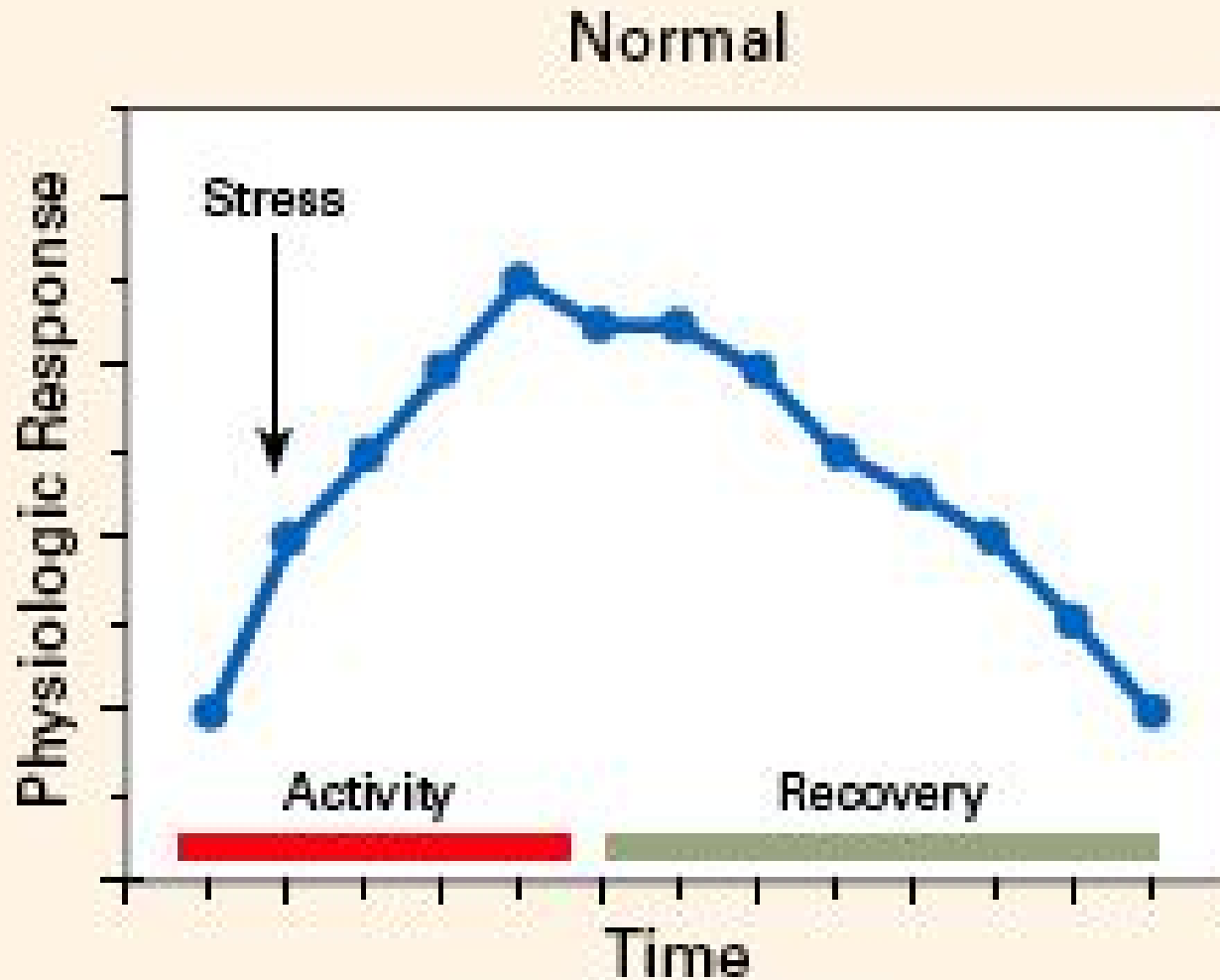


# Neurochemical Response to Stress

- Hypothalamic-Pituitary-Adrenal axis
- Extra-Hypothalamic CRH systems
- Locus Coeruleus-Norepinephrine
- Dopamine Systems
- Serotonin Systems
- GABA Systems
- Glutamate Systems



# Adaptive Allostatic Response

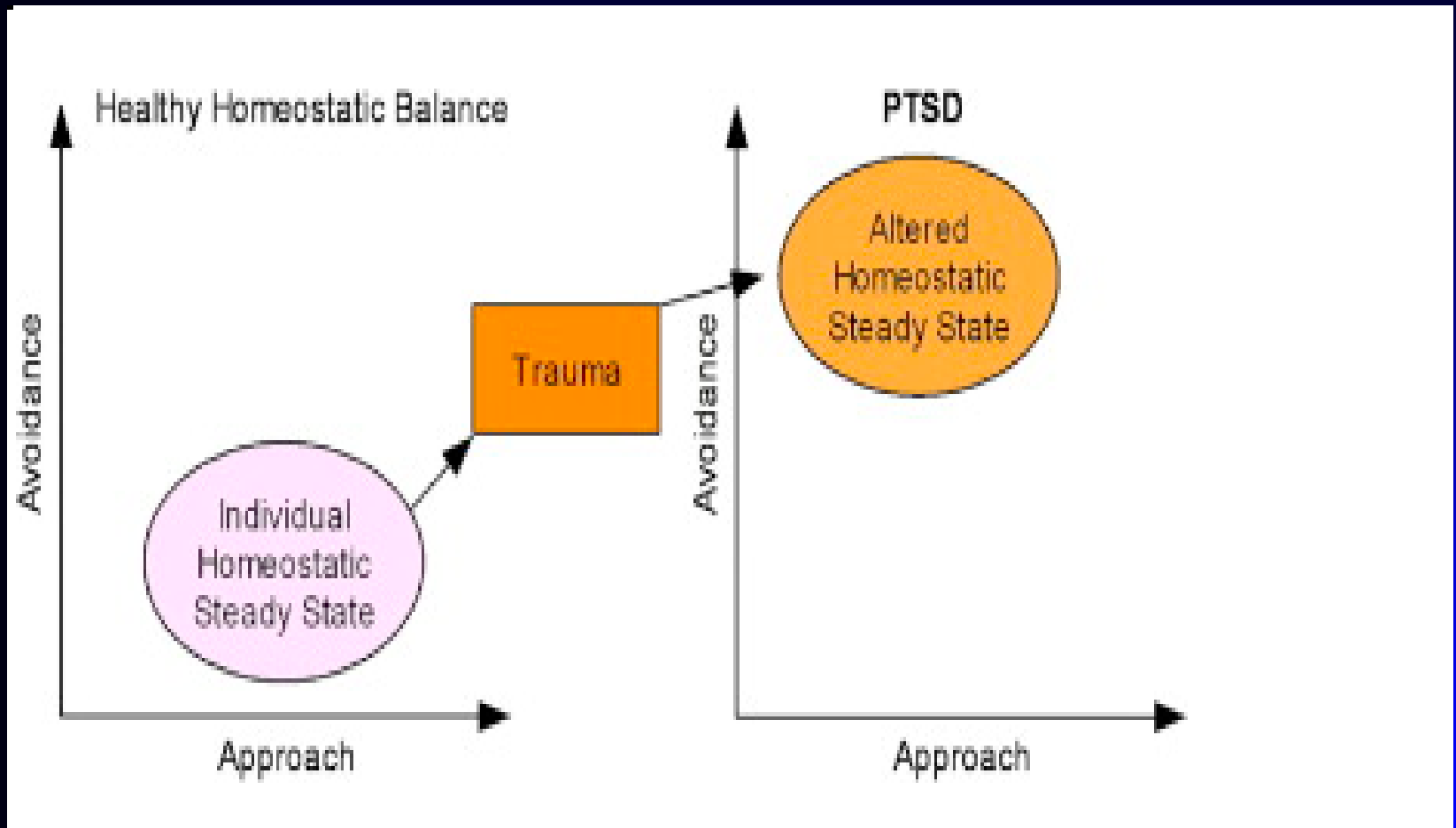


# Stress Response

## Allostasis vs. Homeostasis

- Homeostasis - tightly controlled physiology parameters
- Allostasis - Adaptive response to stress
  - Recruitment of all available physiological, psychological and behavioral resources

# Homeostasis versus Allostasis





# Animal Models of Relapse: Reinstatement (Relapse)

- Resumption of previously drug-reinforced behavior by non-contingent exposure to drug or non-drug stimuli
  - Self-administration training
  - Extinction
  - Test for reinstatement under various conditions
    - » deWit and Stewart, 1981;
    - » Psychopharmacology (2003), Volume 168

# Reinstatement Models

- Drug-primed reinstatement: low dose drug administration
- Cue-induced reinstatement: environmental cues associated with drug use
- Stress-induced reinstatement: foot shock, forced swim, isolation, immobilization, etc.

# Stress-Induced Reinstatement: Pharmacologic and Surgical Manipulation

- Blocked by CRF antagonists
- Induced by CRF agonists
- Blockade of B-receptors in amygdala and BNST blocks stress-induced reinstatement
- Increased by amount of previous drug exposure
- Cue-induced reinstatement increased by stress

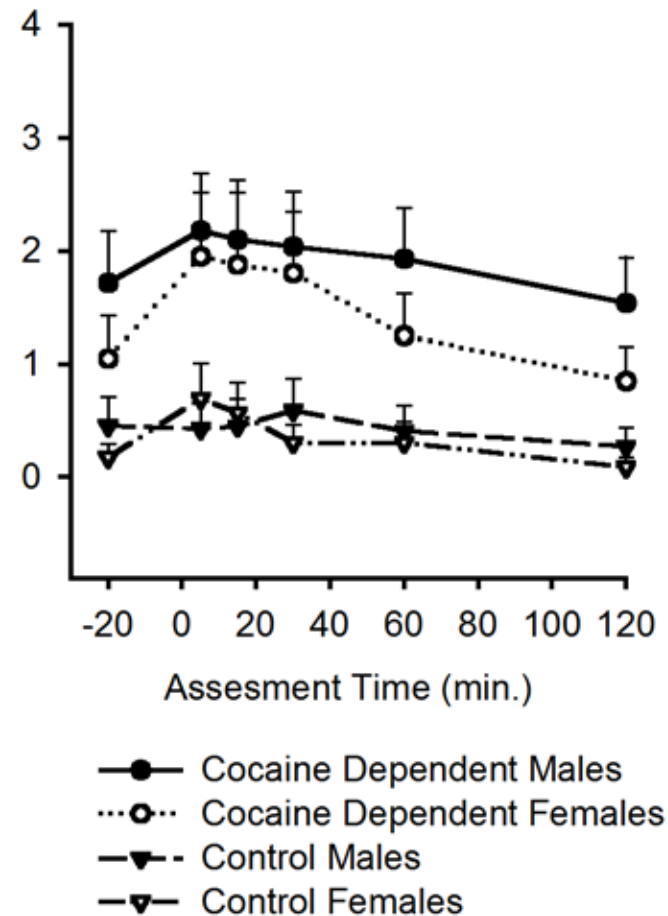
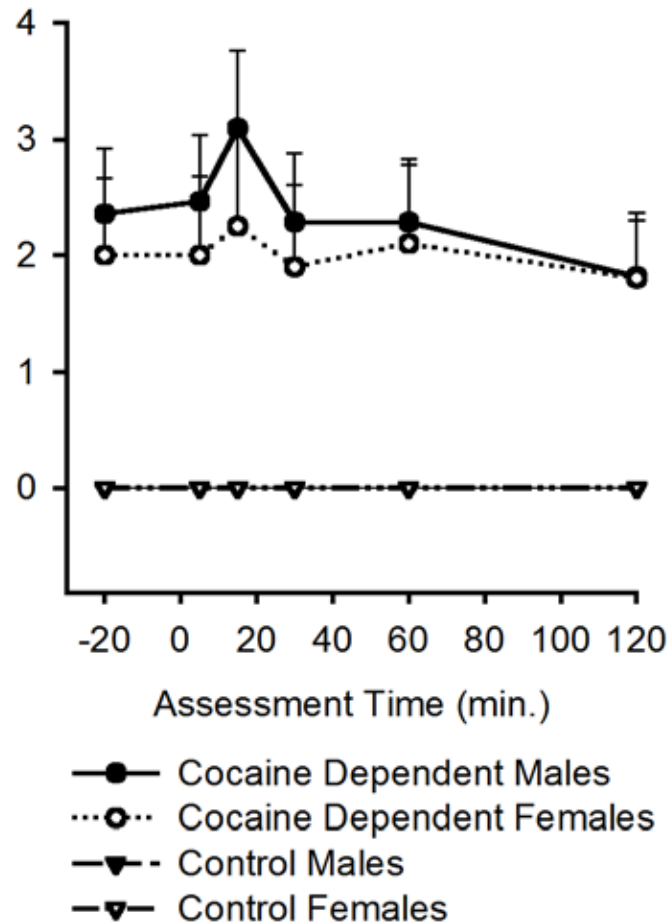
# Stress Response in Drug Dependent Individuals

- Acute withdrawal from all drugs of abuse - activation of HPA axis
- Dysregulation of HPA axis/abnormal stress response persists for weeks to months
- ? Dysregulation associated with early life trauma
- ? Role of dysregulation in drug craving/relapse
  - » Kreek and Koob, 2006

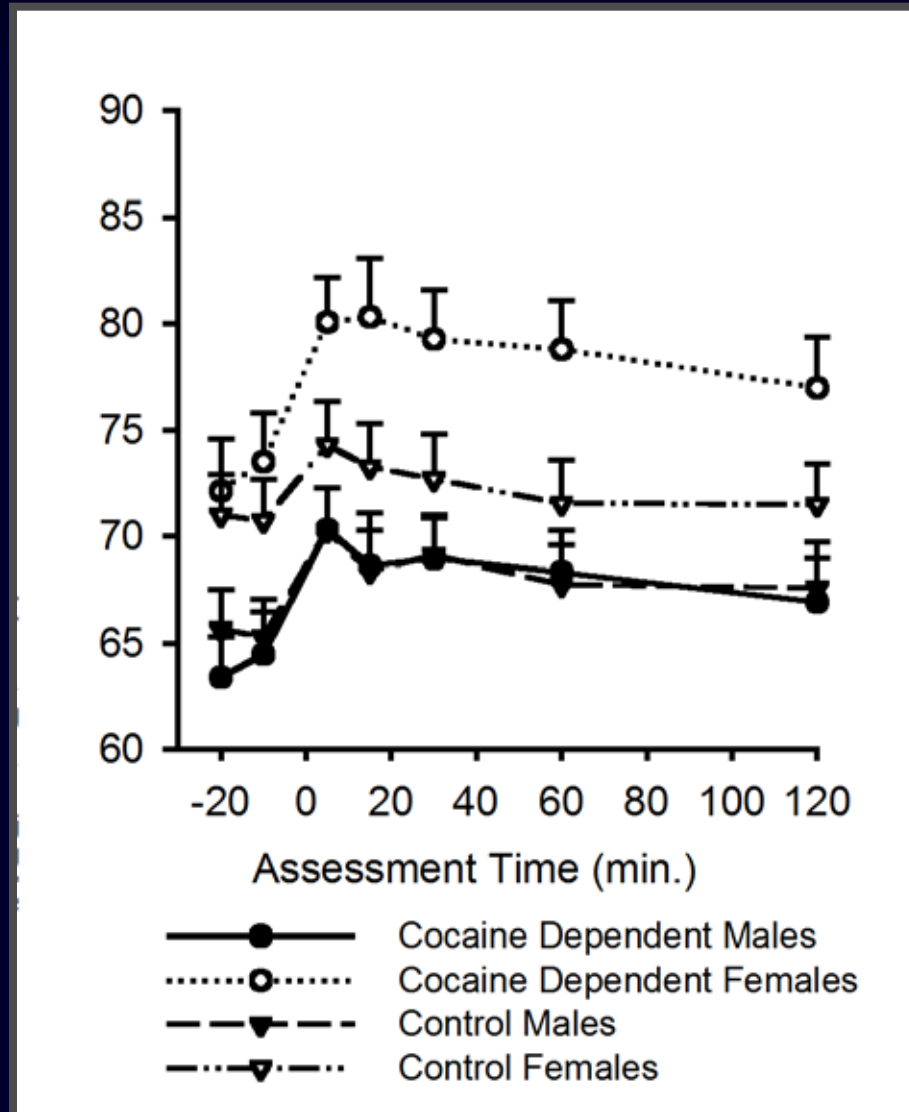
# Human Laboratory Studies

- Stress Exposure
  - Psychological - Trier
  - Physical – Cold Pressor
  - Pharmacologic – CRF, Yohimbine
- Drug-cue Exposure
- Measurement
  - Craving (proxy for use)
  - ACTH/cortisol
  - Physiologic parameters

# Craving and Stress Increase in Response to CRF



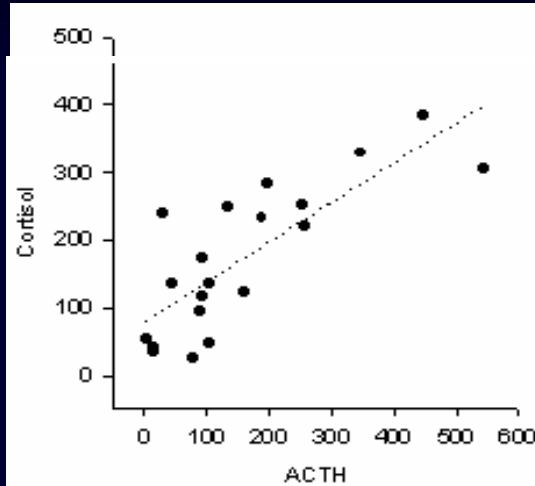
# Heart Rate Responding to CRF



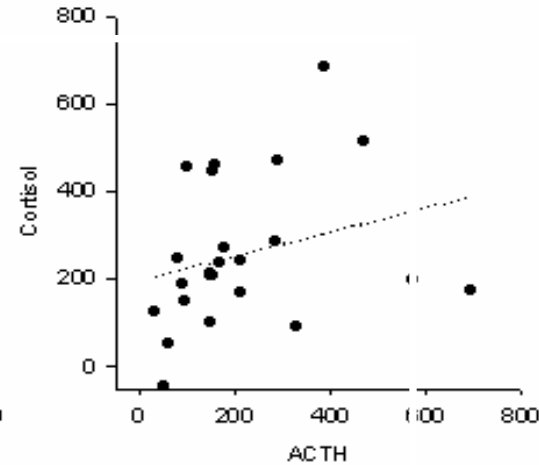
(Cocaine x Gender:  $P = 0.05$ )

# Correlation Between ACTH and Cortisol in Cocaine Dependence

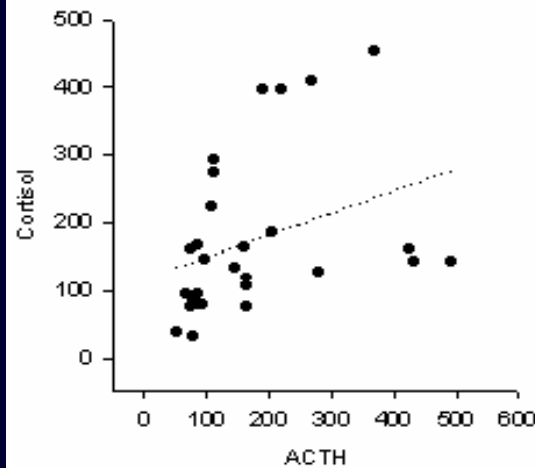
**Control Males**



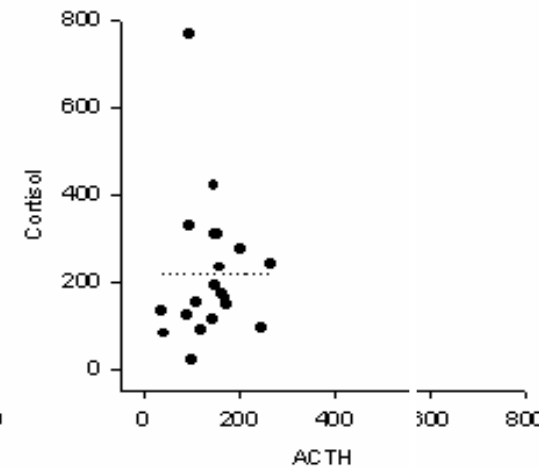
**Control Females**



**Cocaine  
Dependent  
Males**

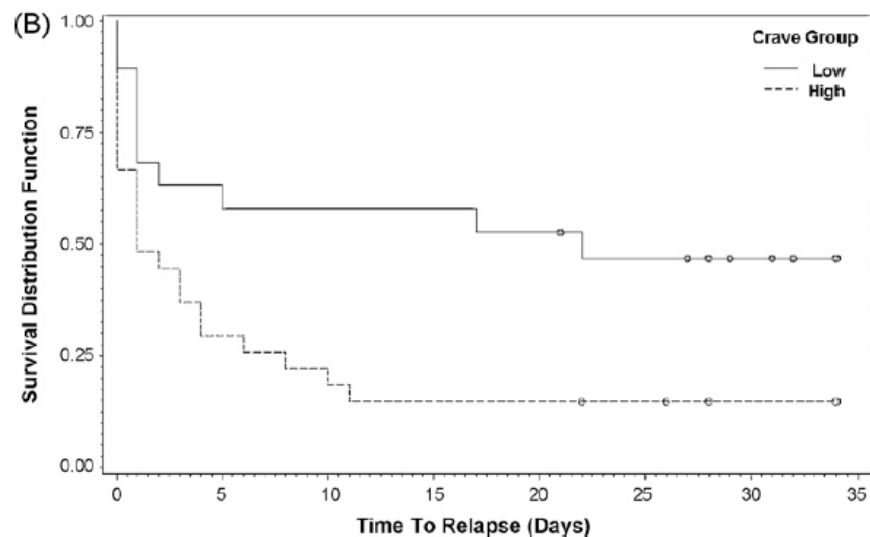
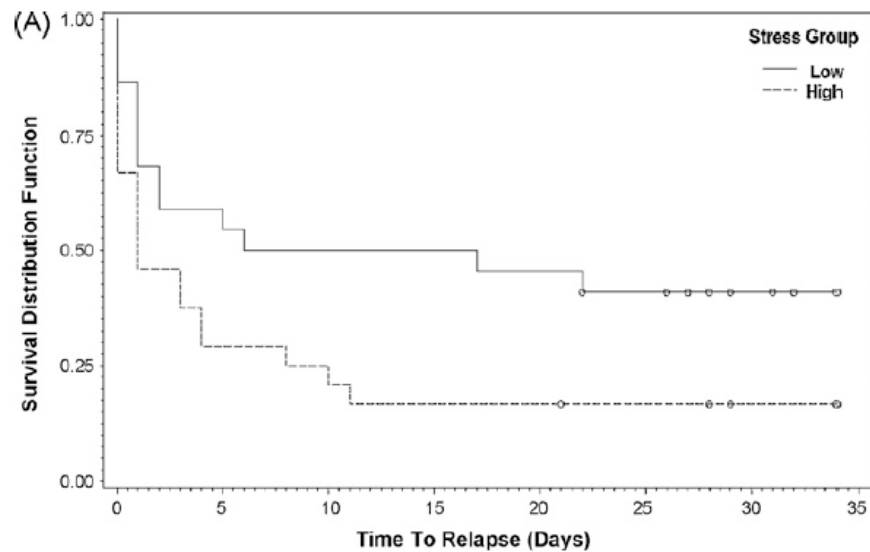


**Cocaine  
Dependent  
Females**

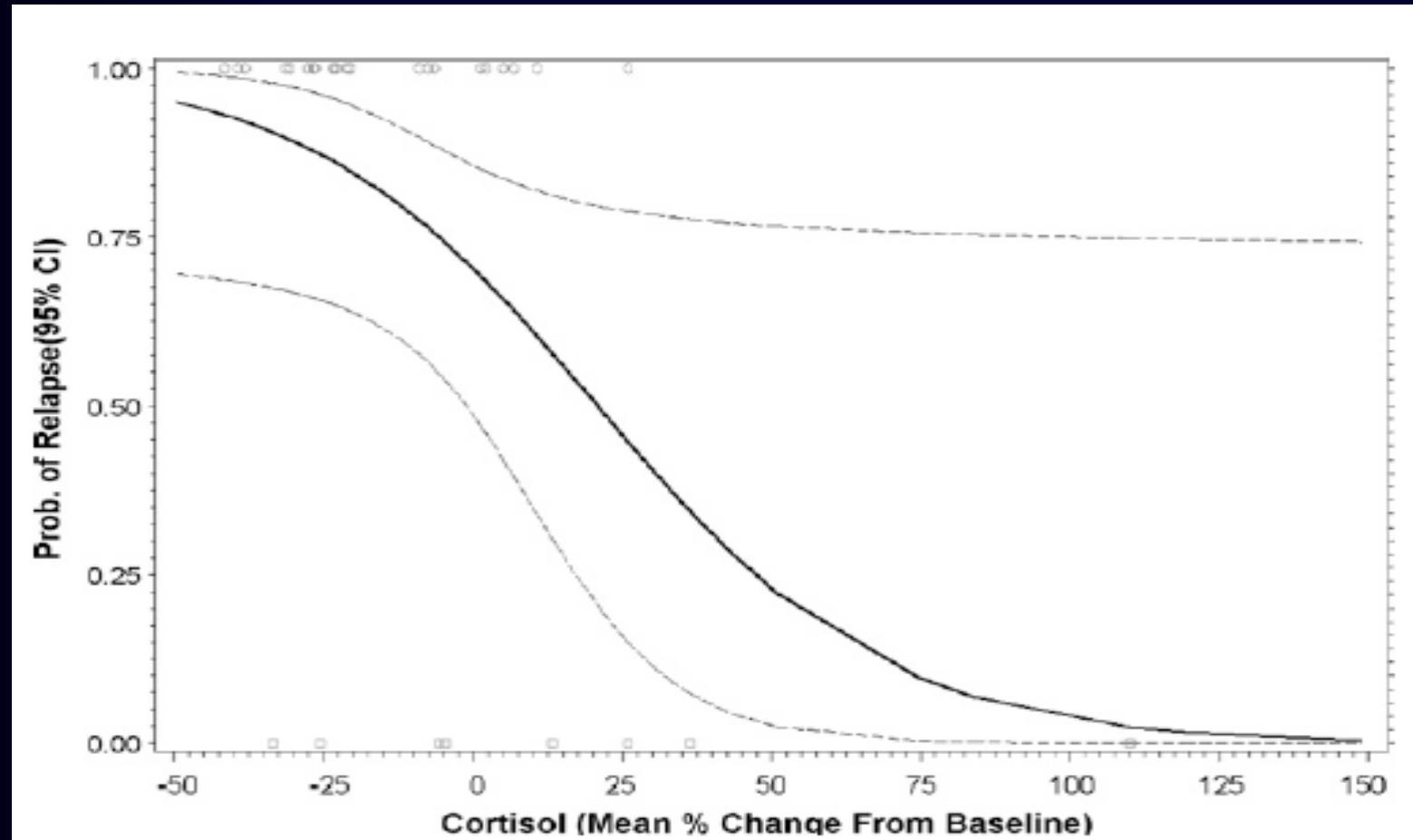


# Relationship Between Stress Response and Relapse???

# Relationship Between CRH-induced Craving/Stress and Relapse



# Probability of Relapse Based on % Cortisol Change from Baseline



# CONCLUSIONS

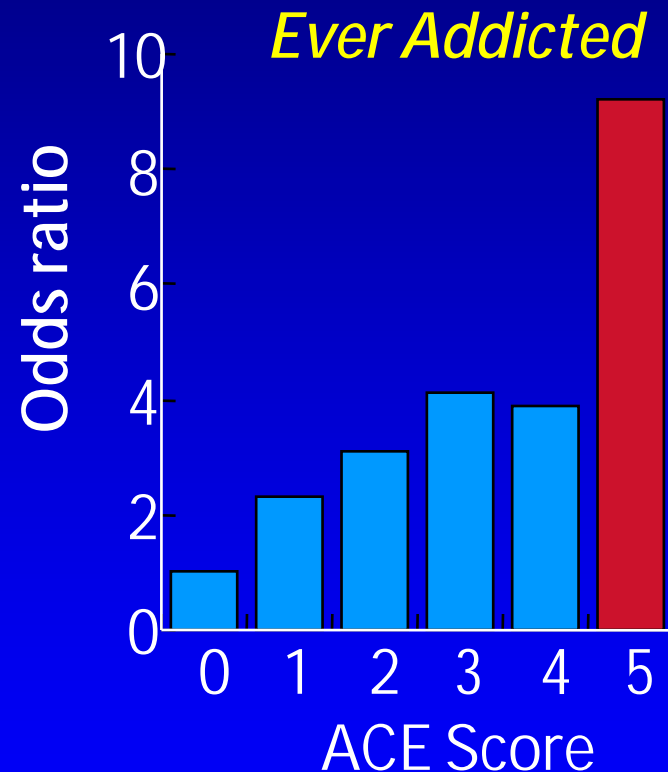
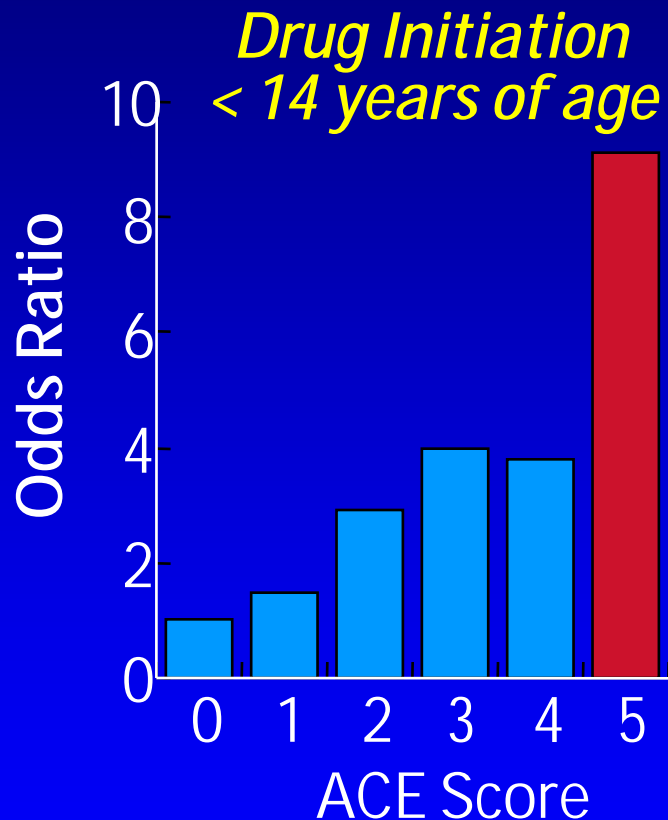
- Elevated craving and stress to CRH and drug cues associated with relapse
- Attenuated ACTH/cortisol response to CRH associated with relapse

? Impact of Early Trauma on  
Stress Reactivity/Addiction

# Childhood Sexual Abuse and Psychiatric Disorders in Women

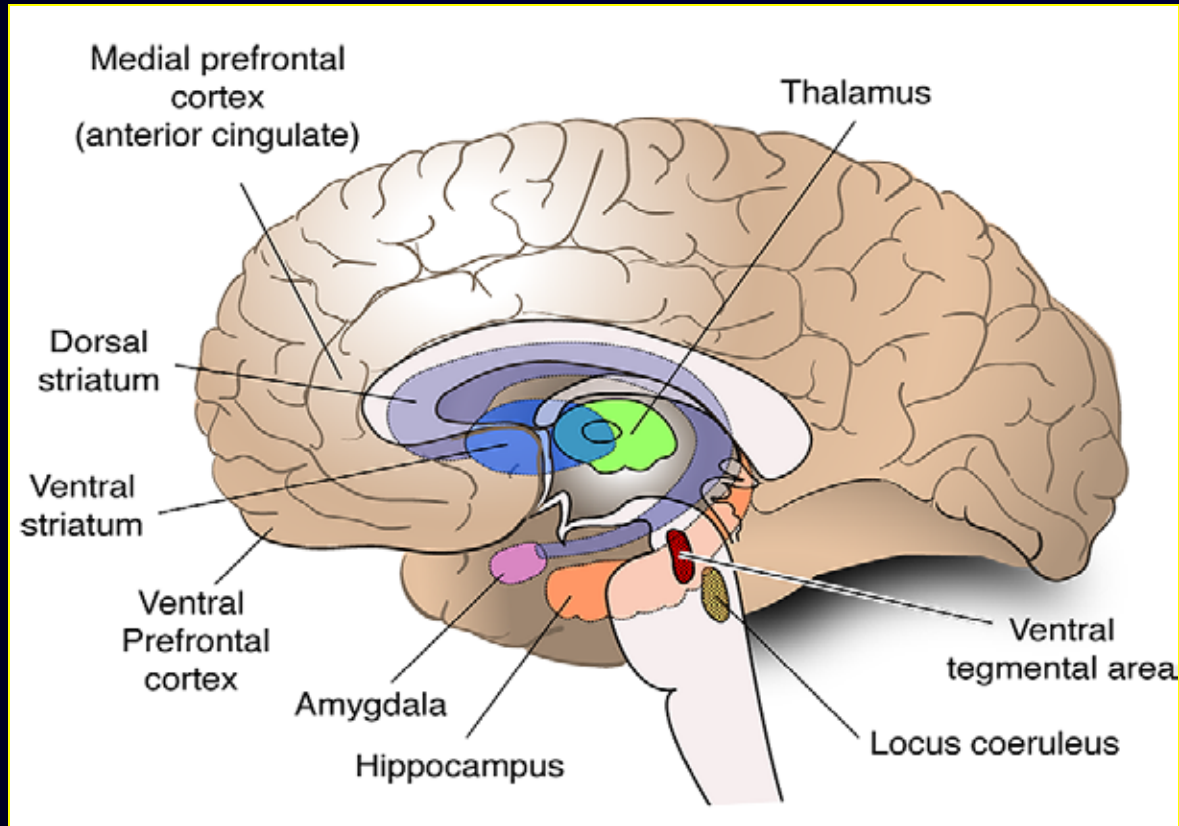
- Abuse positively associated with a number of disorders
- Strongest relationship with alcohol/drug use
- More severe abuse increases risk
- Not explained by background/familial factors

# Adverse Childhood Experiences (ACE) and Illicit Drug Use (n = 8603)



*ACE account for one half to two third of serious problems with drug use.*

# Does Stress Alter Reward Sensitivity before Development of Addiction?

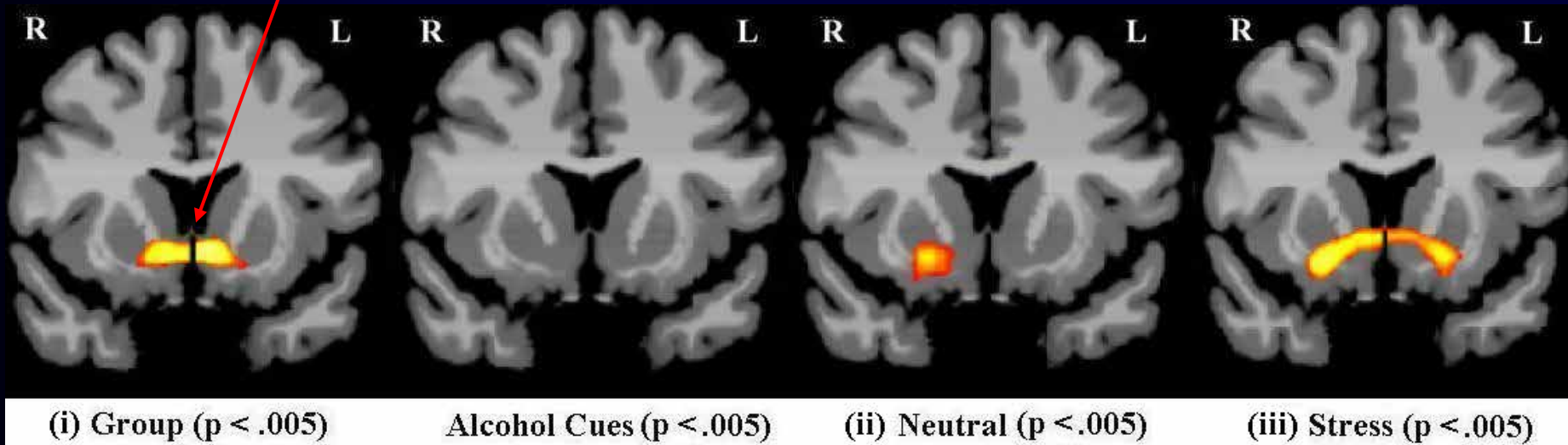


# Effects of Childhood Trauma on Reward Sensitivity (Jia et al.)

- 36 light to moderate social drinkers.
- Two risk groups (HR vs LR) on the basis of high and low ratings on Childhood Trauma Questionnaire (CTQ, Bernstein et al., 1998).
- Exposed to 2 stress, 2 alcohol cue and 2 neutral relaxed trials presented during fMRI

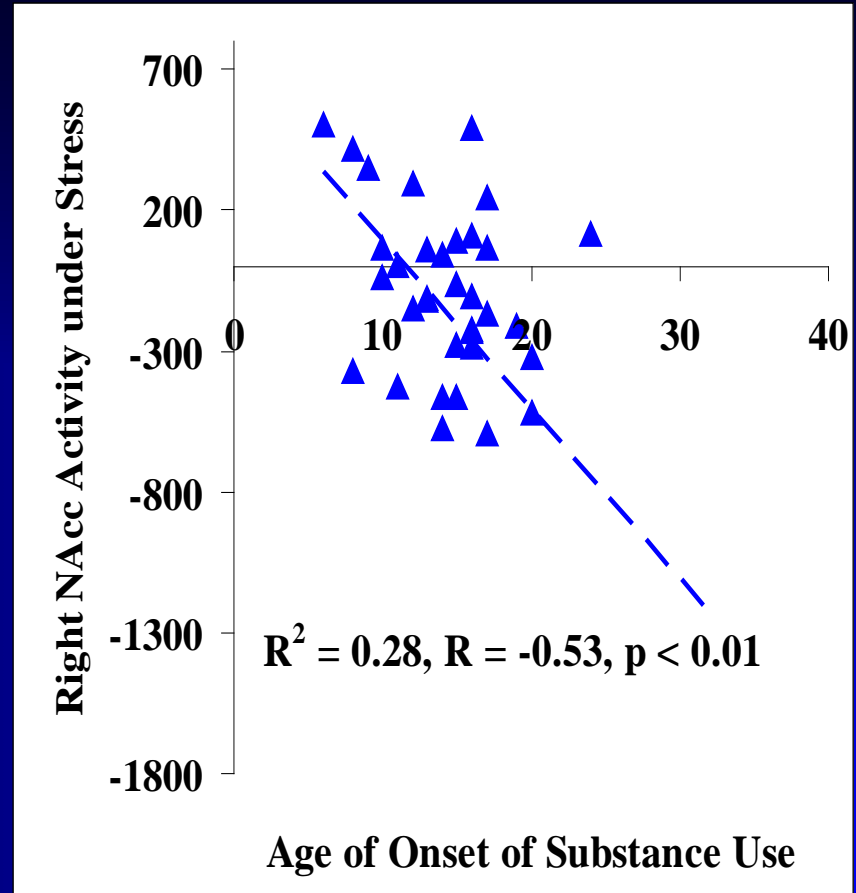
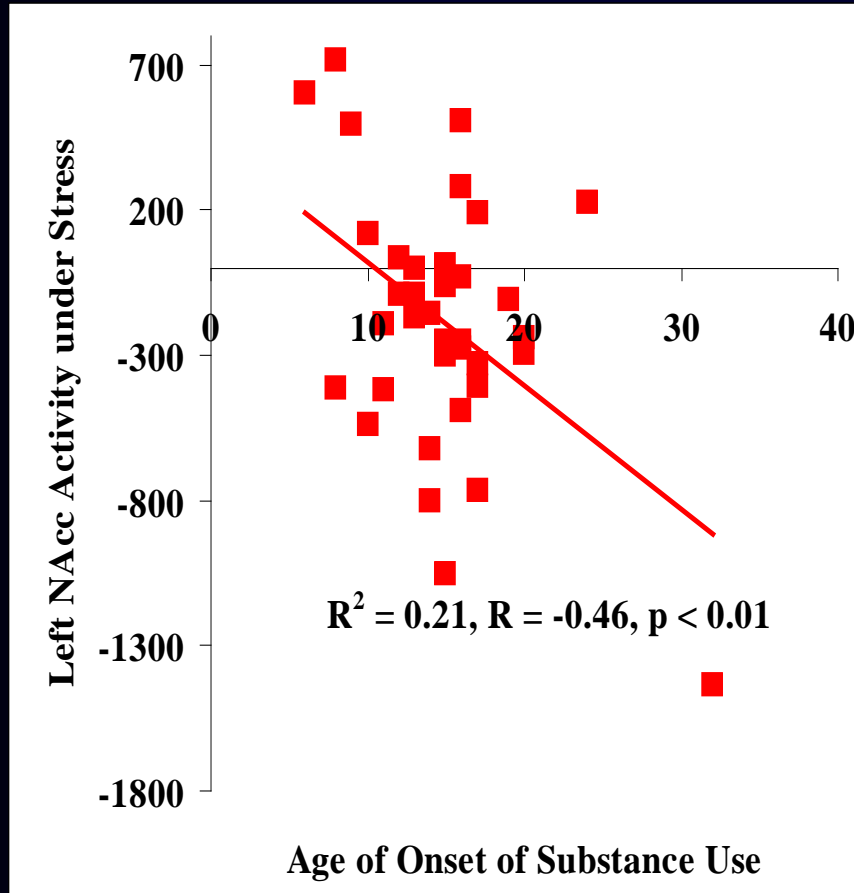
# Neural Response to Stress in Healthy Adults with High vs Low Childhood Trauma

Nucleus Accumbens/Striatum



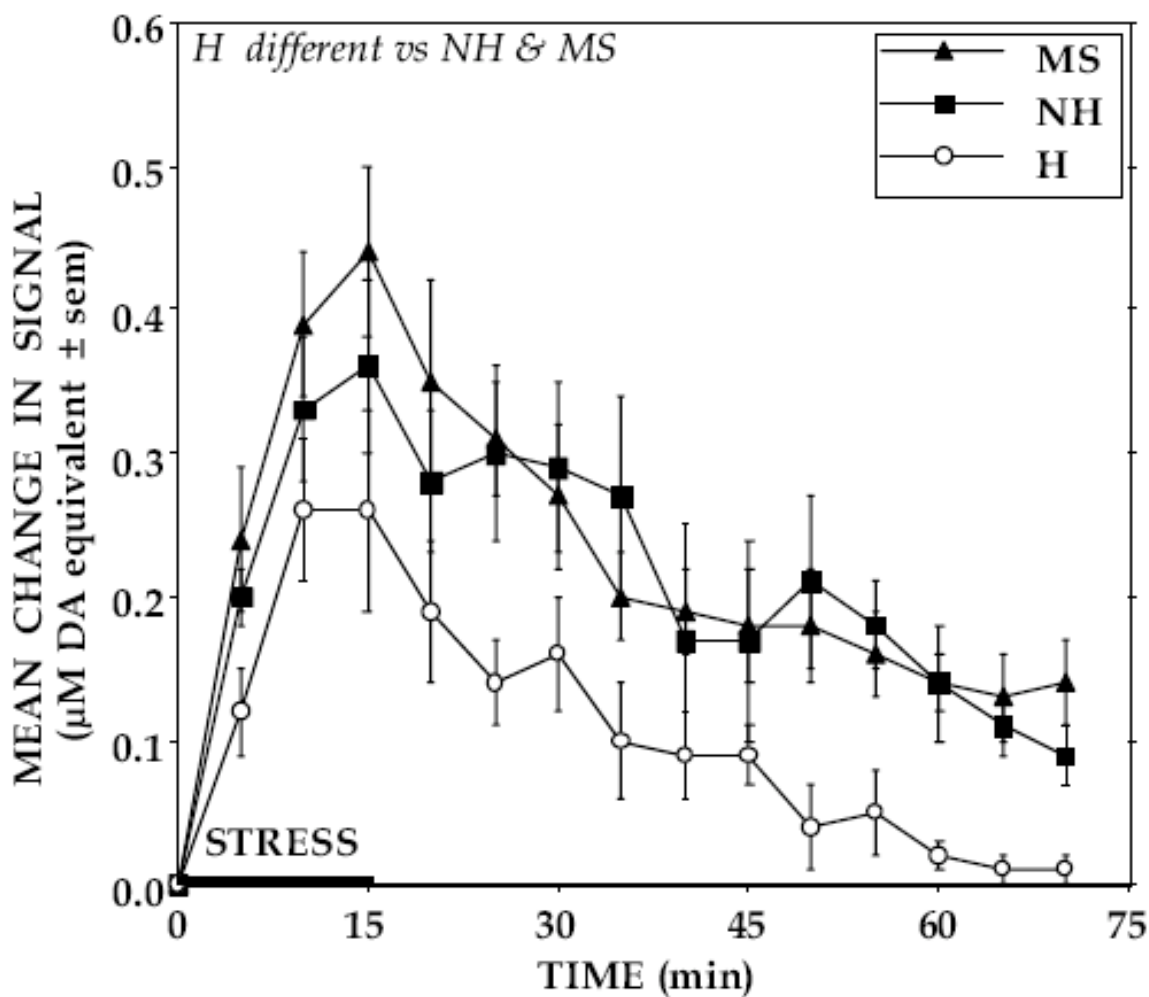
Individuals with greater childhood trauma (HR) showed greater nucleus accumbens/striatum (reward) activity with stress and with neutral relaxing stimuli compared to LR group. CTQ scores correlated positively with this NAcc activity ( $p < .01$ ).

# Significant Correlation between NAcc Activity (right) during Stress with Age of First Substance Use

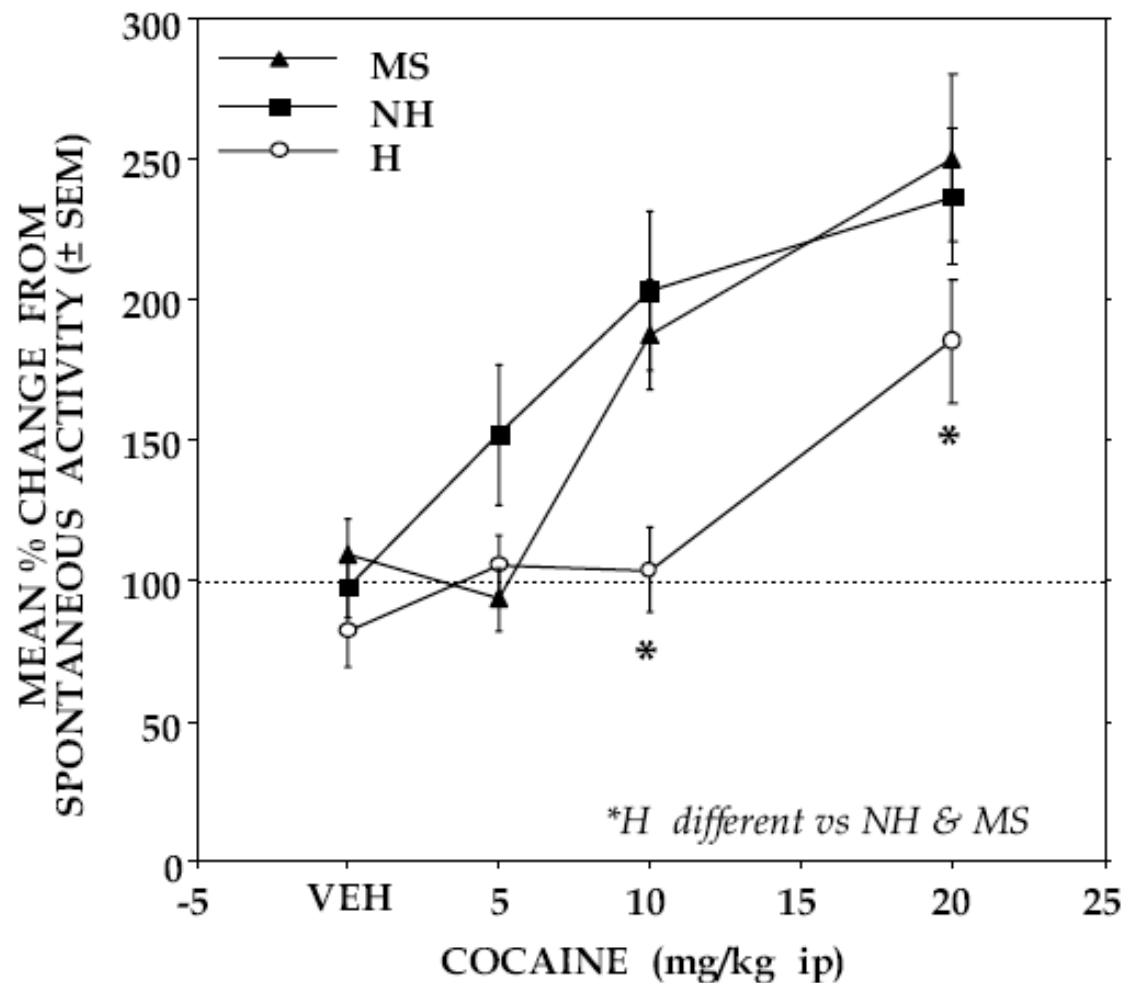


How do early experiences  
produce long-lasting changes  
in vulnerability to the  
development of addictions and  
other disorders??????

# Mean Stress-Induced Changes in Dopamine Signals in Core Region of Nucleus Accumbens of Maternally Separated & Handled Animals

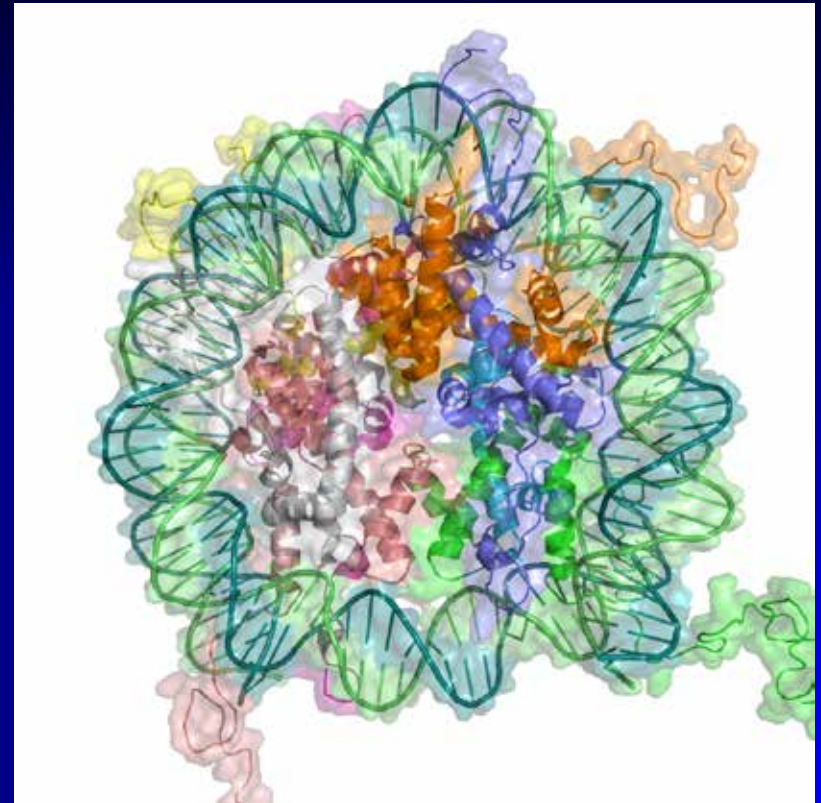


# Mean Changes in Locomotor Activity following Injection of Saline or Cocaine

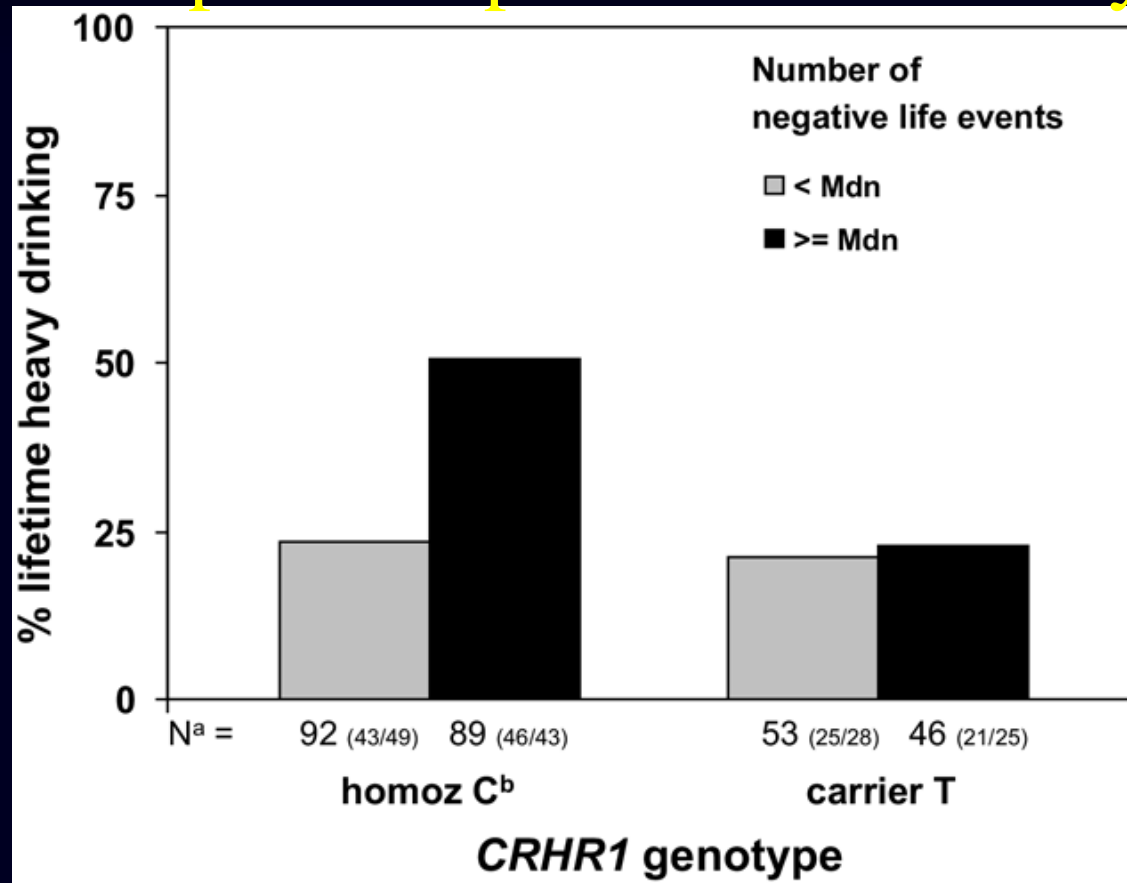


# Epigenetics

- Environmentally-induced changes in DNA expression
- Methylation, acetylation of histones impacts transcription
- Gene-by-environment interactions – CRF polymorphisms



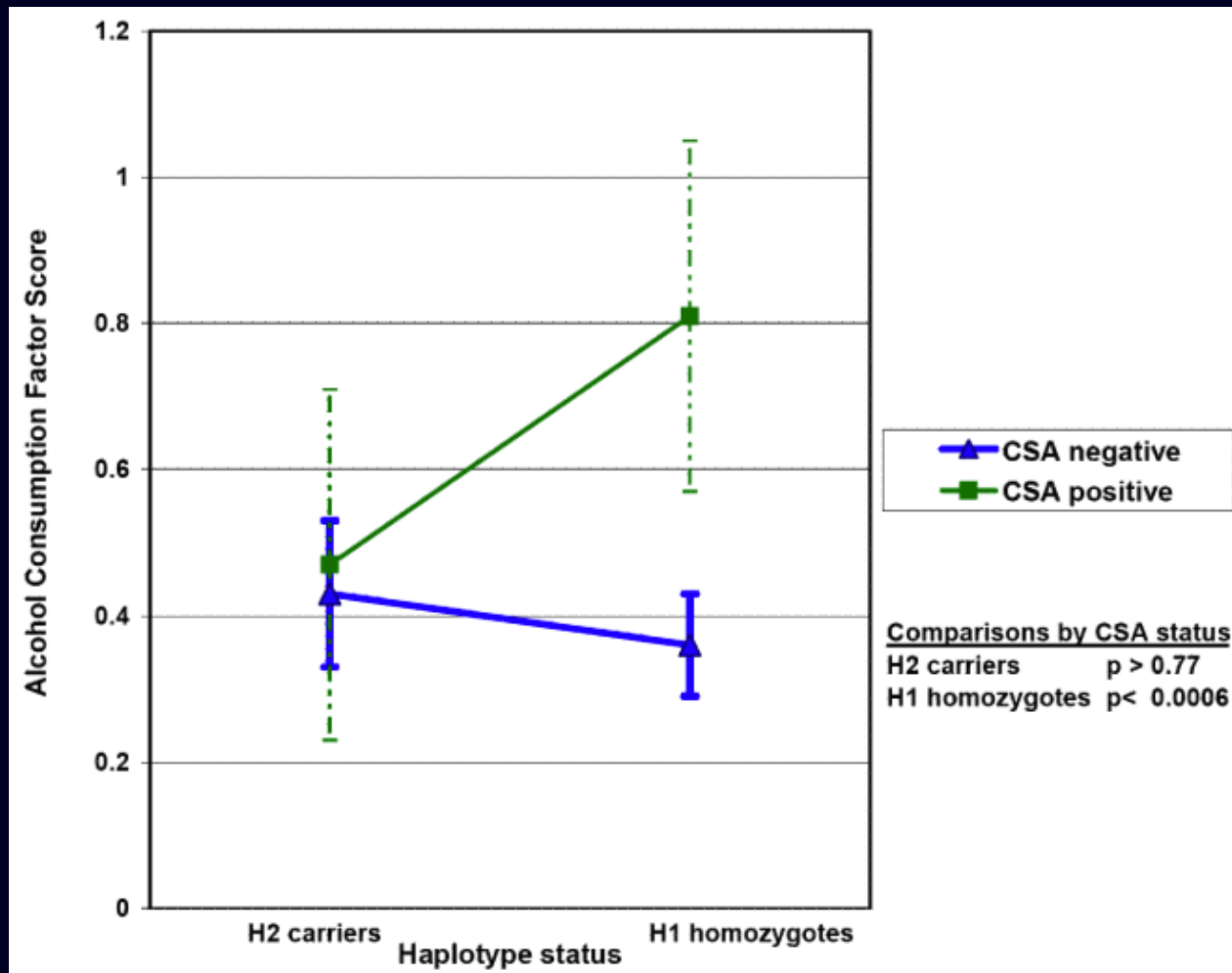
# Impact of Negative Life Experience on Alcohol Consumption Depends on CRF Polymorphism

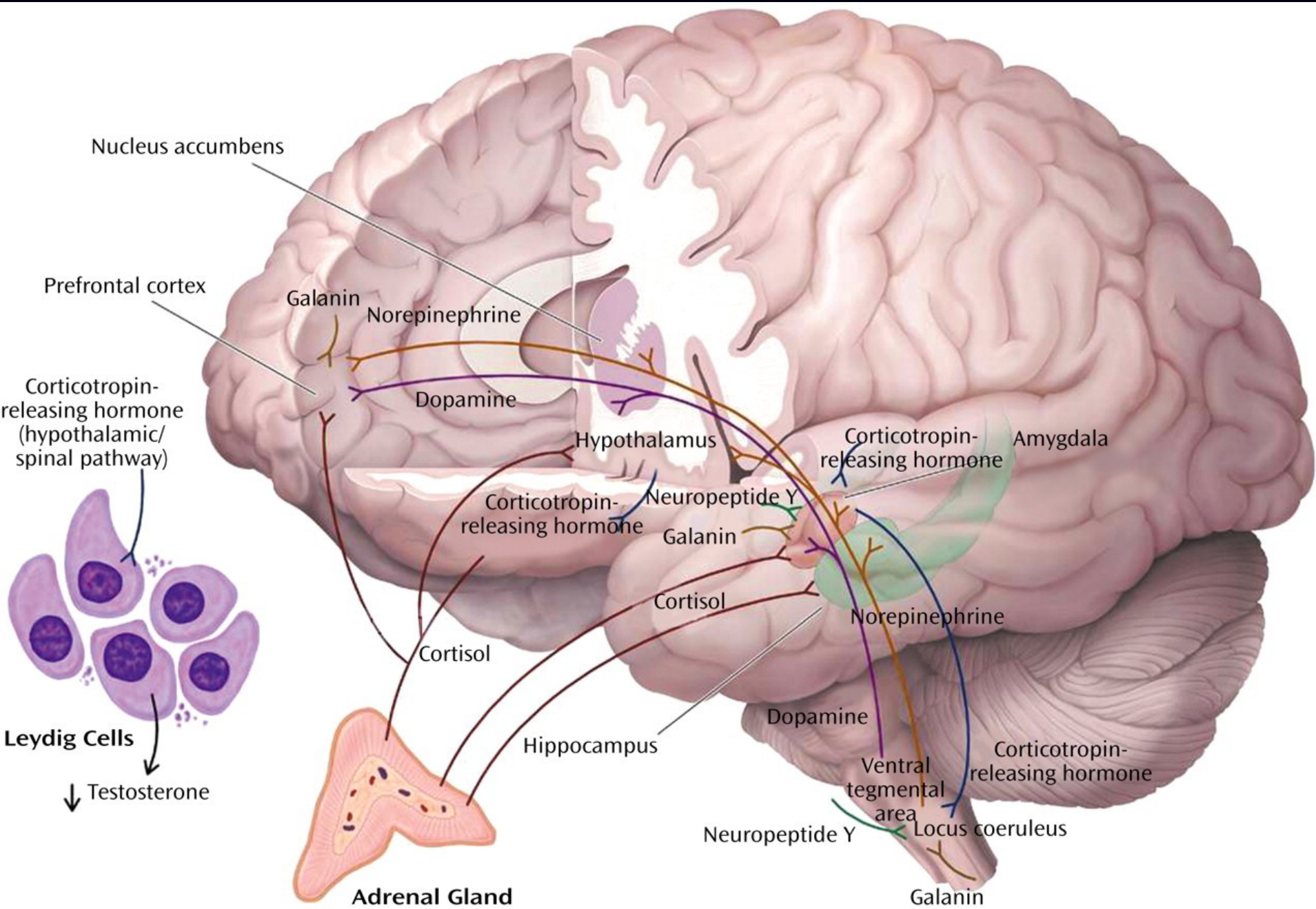


*Percentage of lifetime heavy drinking adjusted for sex in adolescents grouped by genotype and exposure to negative life events.*

Blomeyer, et al., 2008  
*Biol Psychiatry*

# Mean Alcohol Consumption by H1/H2 haplotype and CSA status





# OXYTOCIN



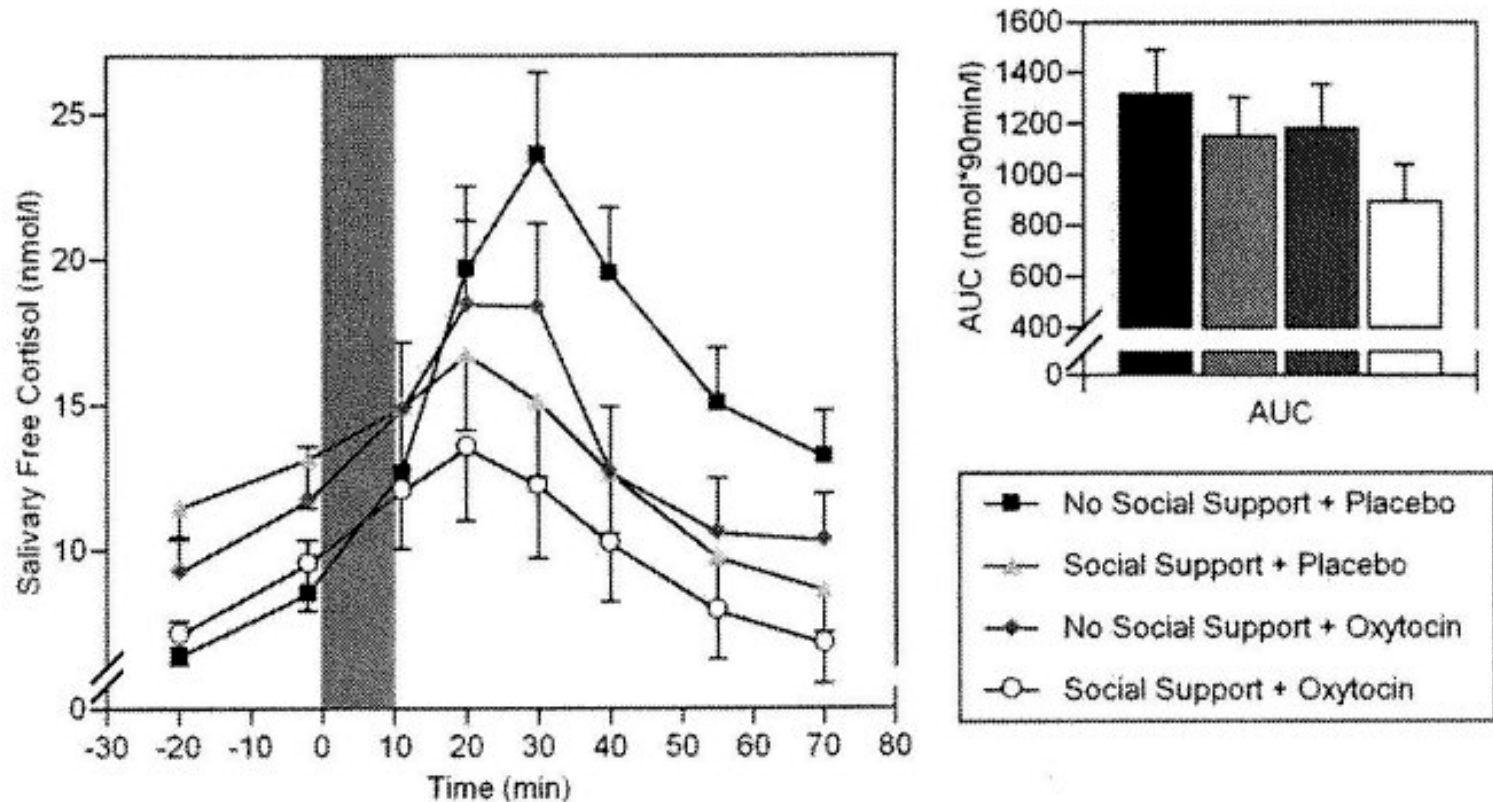
- Regulates lactation
- Promotes affiliative behavior
- Anxiolytic, released in response to stress
- Decreases HPA and "fight or flight" response

# Interaction of Social Support and Oxytocin on Stress Response

- 37 healthy males
- Trier Social Stress Test
- Social support from friend during preparation
- Intranasal oxytocin (24 IU) before task
- Measure cortisol, subjective effects

» Heinrichs et al., 2003

# Social Support and Oxytocin in Psychosocial Stress Task



# OXYTOCIN AND MARIJUANA/COCAINE CRAVING

- Pilot human laboratory studies
- Intranasal administration of oxytocin versus placebo
- Trier Social Stress Task
  - Decreased cortisol
  - Decreased stress response
  - Decreased craving

# PTSD and SUBSTANCE USE DISORDERS

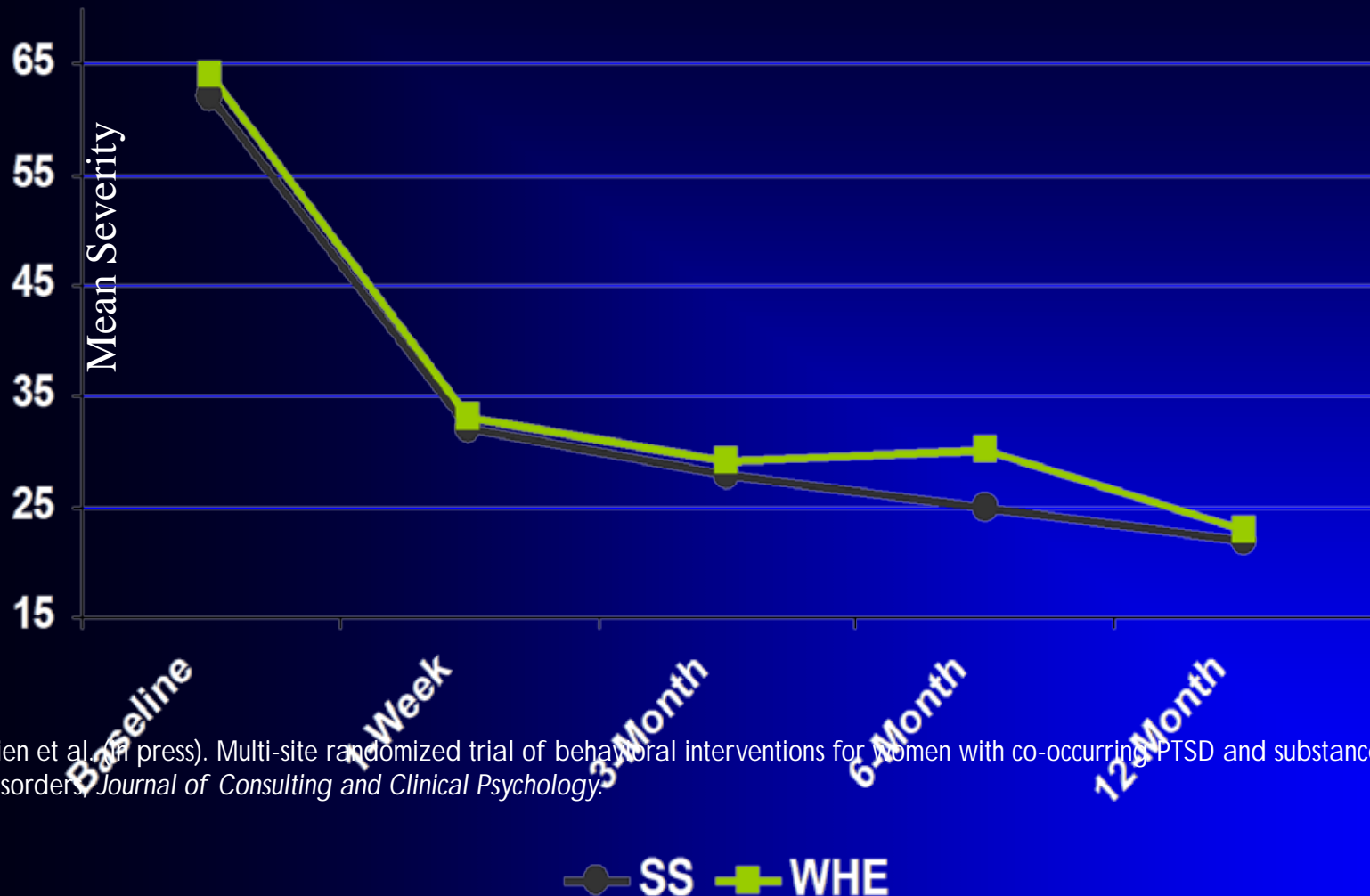
Little empirical evidence to  
guide treatment:

- Traditional substance use programs defer treatment of trauma related issues
- PTSD programs don't accept individuals with active substance use disorders

# Psychotherapeutic Treatments

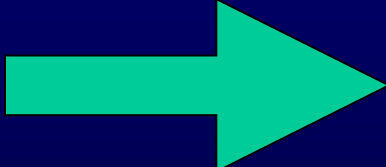
- Cognitive-behavioral therapies efficacious in both PTSD and substance use disorders
- Manualized integrated treatments promising
  - Relapse prevention + stress inoculation + exposure (Triffleman et al., 1999)
  - Imaginal exposure + relapse prevention (Brady et al., 2002)
  - Education + relapse prevention + coping skills ("Seeking Safety", Najavits et al, 2002)

# Seeking Safety in CTN: Trauma Severity (N=353)



Hien et al. (in press). Multi-site randomized trial of behavioral interventions for women with co-occurring PTSD and substance use disorders. *Journal of Consulting and Clinical Psychology*.

# Temporal Course of Improvement in PTSD/SUD

- Investigate relationship between improvements in PTSD and substance use during 12 week treatment phase
- PTSD improve  SUD improve
- SUD improvement not associated with PTSD improvement

# Concurrent Treatment with Prolonged Exposure (COPE)

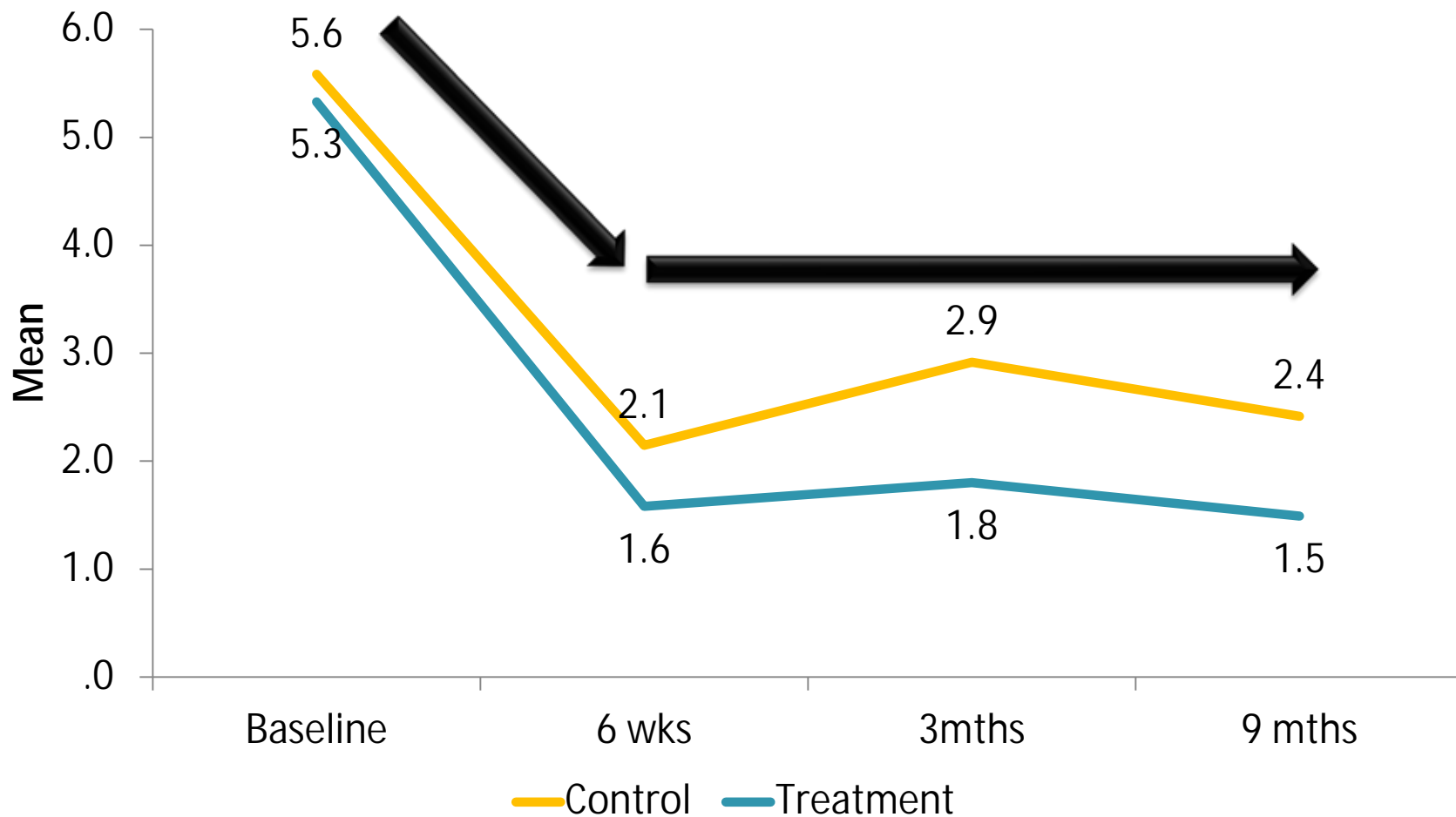
- 12 sessions, manual guided, individual therapy
- First 4 sessions CBT for cocaine - education re: trauma response/ PTSD
- Sessions 5-12 exposure

Brady, Back, Foa, Carroll

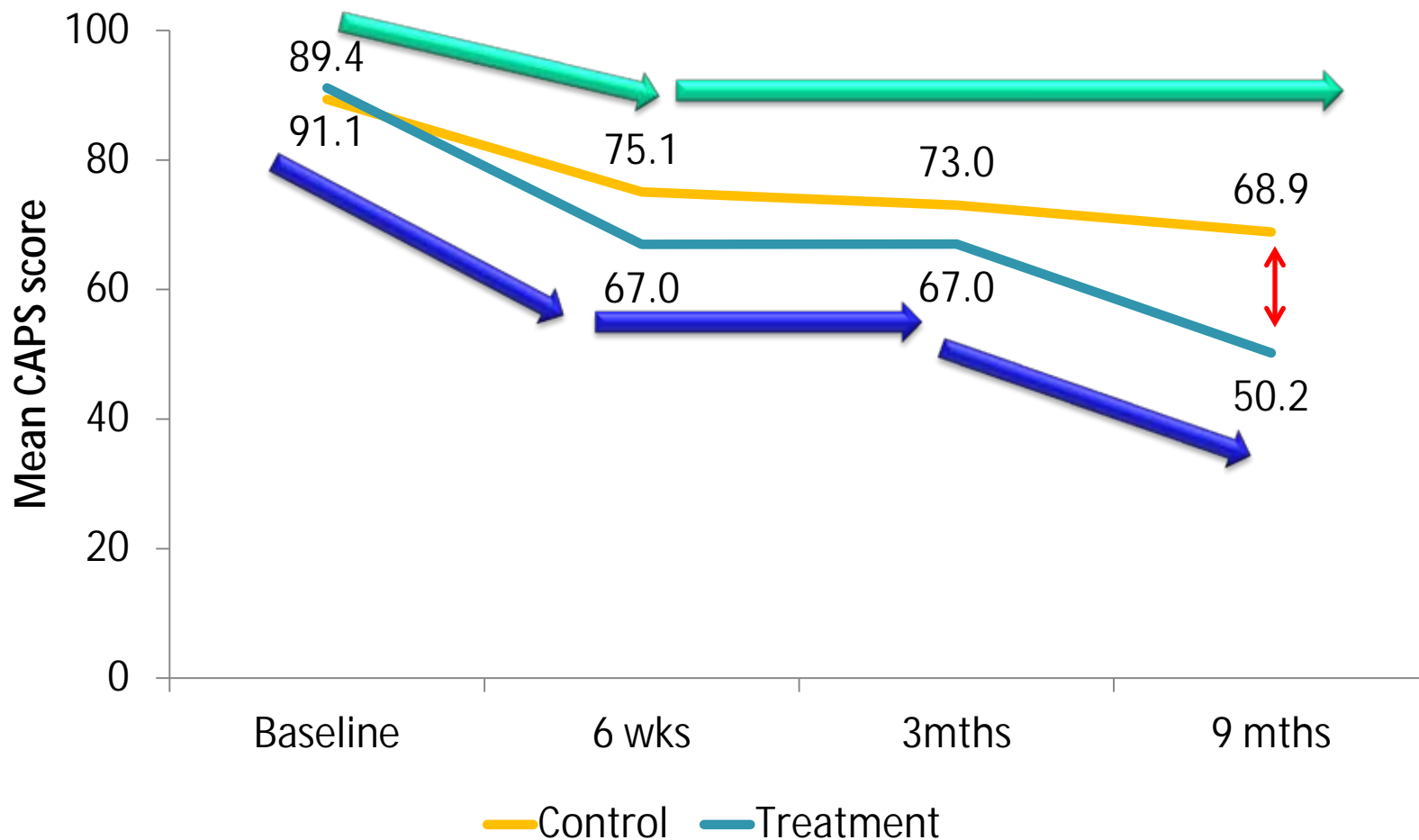
# COPE Clinical Trials

- University of New South Wales: 120 individuals with drug dependence/PTSD, compared to treatment as usual
- Columbia University: 120 individuals, compared with Relapse Prevention CBT
- MUSC: OEF/OIF Veterans

# Severity of dependence



# Severity of PTSD symptoms



# Effects of Stress/Trauma On Substance Use Disorders



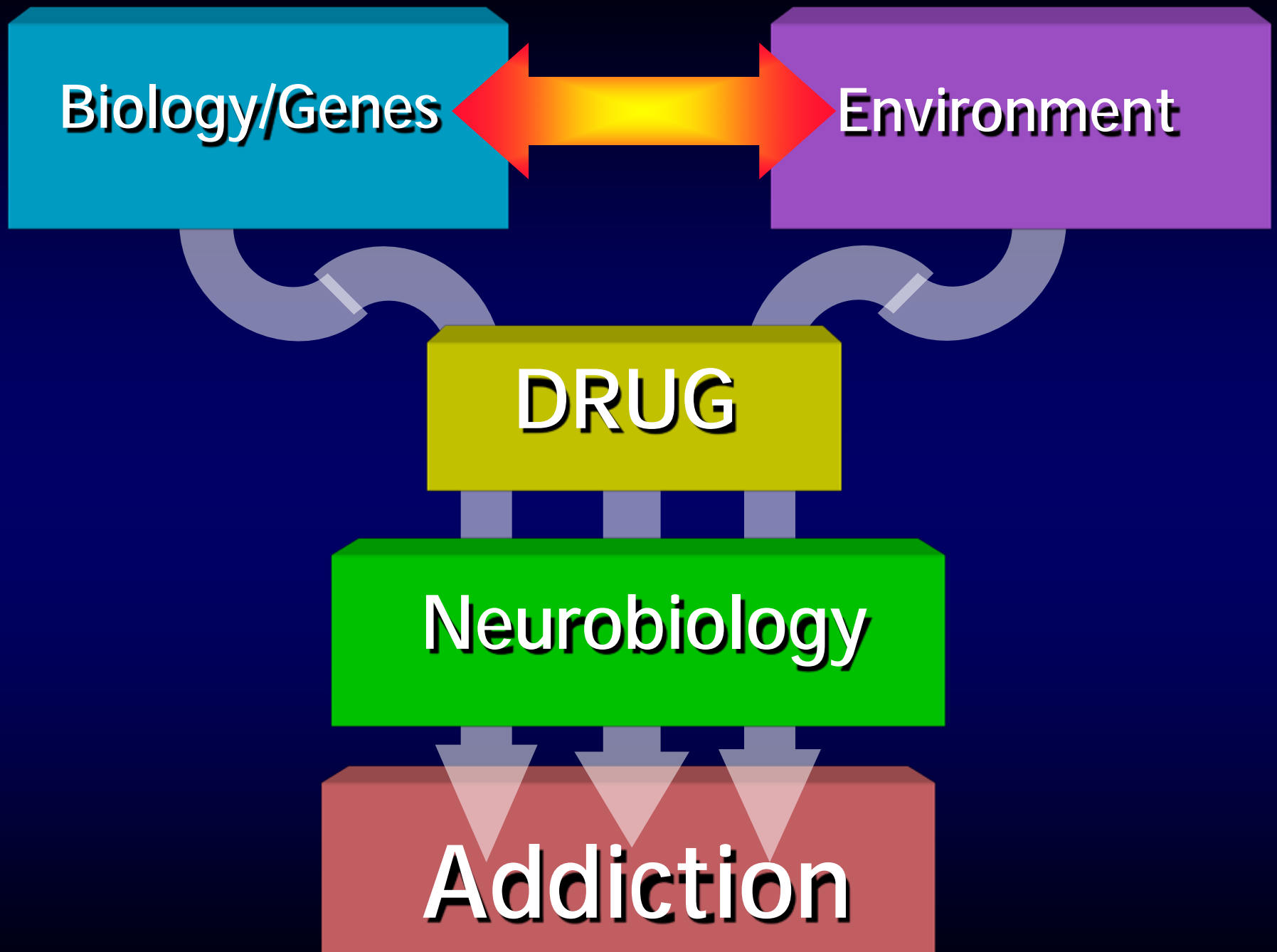
1. Facilitate  
initiation



2. Increase risk  
of developing  
addiction after  
initiation



3. Trigger relapse



# Stress and Substance Use Disorders: Clinical Considerations

- Careful assessment/aggressive treatment of co-occurring stress sensitive disorders
- Importance of social support in mediating effects of stress
- Careful attention to environmental factors – ongoing stress/abuse
- Coping Skills/Stress Management Techniques

# CONCLUSIONS

- Relationship between stress and substance use/relapse, development of dependence
- Mechanistic studies important
- Identification of new avenues for treatment development

