

Results: Substance use and sexual risk-taking data were summarized for the first 57 Veteran participants. Participants were 23–59 years old (Mean = 33); 38 (67%) reported illicit drug use or alcohol use to intoxication in the past 28 days. Participants' mean age at first sex was 16; mean lifetime sexual partners was 27 (range 1–150). Number of partners in the past 12 months ranged from 0 to 20 (Mean = 2.2). Twenty-two percent of participants reported a lifetime STI. Veterans with and without substance use did not differ on lifetime sexual behavior variables, but the former were significantly more likely to report recent sex under the influence of drugs or alcohol ($p = .034$) and were less likely to have used a condom with a casual sexual partner in the past 28 days ($p = .033$). Other measures to be compared include performance on two behavioral tasks: the IMT/DMT (Dougherty) and the Risk and Ambiguity Task (Levy), and biological indicators of risk propensity: 2:4 digit ratio and CAGn.

Conclusions: Veterans reporting recent illicit substance use or risky alcohol use reported greater likelihood of engaging in recent high-risk sexual behavior. Analyses comparing these groups on biological propensity to take risks and performance on behavioral risk-related tasks are underway and will be reported.

Financial support: This study is funded by the MIRECC; Department of Veterans Affairs.

<http://dx.doi.org/10.1016/j.drugalcdep.2015.07.518>

Reduction in prescription opioid misuse among enrollees into opioid treatment programs



Andrew Rosenblum*, Chunki Fong, Harlan Matusow

ITSR, National Development and Research Institutes, New York, NY, United States

Aims: To examine 6-year trends of prescription opioid (PO) non-medical use among opioid-dependent patients enrolling in opioid treatment programs (OTPs).

Methods: Newly admitted patients to OTPs, in a nationwide prevalence study, completed a one-page self-administered survey of past month heroin and non-medical PO use. Data were collected from 42,502 patients in 96 OTPs across 34 states from January 2008 to March 2014.

Results: Respondents' average age was 34, 55% male, 81% white ethnicity; 38% reported employment as the major source of income. Over the six years, 77% reported non-medical use of at least one type of PO and 55% reported heroin use. Heroin use declined from 57% in 2008.Q1 (1st quarter of 2008) to 49% in 2010.Q3 and then increased to 61% in 2014.Q1. PO use increased from 79% in 2008.Q1 to 84% in 2010.Q3, and then decreased to 66% in 2014.Q1. Misuse of extended-release oxycodone (Oxy-ER) increased from 39% in 2008.Q1 to 47% in 2010.Q2 and then showed a steep decline to 16% by 2014.Q1. Except for buprenorphine, non-medical use for other POs also decreased, but not at as steep as Oxy-ER, with methadone misuse showing the greatest decline from 44% in 2008.Q1 to 24% in 2014.Q1.

Conclusions: This study documents a modest increase in PO misuse from 2008 to 2010 followed by steep declines in the misuse of ER-Oxy as well as other prescription opioids extending to 2014. During this latter period several systemic changes associated with POs occurred such as introduction of tamper proof/abuse deterrent medications and establishment of drug monitoring programs in several states. The findings underscore the importance of ongoing surveillance of illicit use of POs and suggest that changes in opioid prescribing practices and formulations may have influenced declines in PO misuse.

Financial support: Denver Health is part of the Researched Abuse Diversion and Addiction-Related Surveillance (RADARS®) System.

<http://dx.doi.org/10.1016/j.drugalcdep.2015.07.519>

Moderating effects of decision-making on cannabis use and body mass index among adolescents



Jessica M. Ross*, Paulo Graziano, Jacqueline C. Duperrouzel, Ingrid Gonzalez, Raul Gonzalez

Psychology, Florida International University, Miami, FL, United States

Aims: One side effect of cannabis use is increased appetite; however, the research on the association between cannabis use and body mass index (BMI) has produced contrary findings. Research has found that cannabis use is associated with a higher BMI among adolescents, but lower BMI with adults. These contradictory findings may be explained, in part, by differences in decision-making (DM), as DM deficits are often reported among individuals with cannabis addiction, as well as those with higher BMI scores, and are also better developed among adults compared to adolescents. The current study evaluated if DM moderated the relationship between lifetime amount of cannabis use and BMI among adolescents. We hypothesized that more cannabis use would be associated with greater BMI but only among those with poor DM (as assessed by the Iowa Gambling Task [IGT]).

Methods: Participants were 127 adolescents, ages 14–17, recruited from South Florida middle and high schools, a majority who are at risk for escalating cannabis use. Exclusion criteria included a history of neurological, developmental or psychiatric disorders.

Results: Multiple linear regressions revealed that the interaction between cannabis use and DM performance predicted BMI ($p = .04$). Simple slope difference tests concluded that among those with below average DM, more cannabis use was associated with a higher BMI, $\beta = .42$, $t(120) = 2.88$, $p < .01$. Those with average DM performance also showed a positive relationship between more cannabis use and a higher BMI, but of a smaller magnitude, $\beta = .18$, $t(120) = 2.12$, $p = .04$. In contrast, there was no association between cannabis use and BMI among those with above average DM ($p = .72$).

Conclusions: Our results support previous findings of greater amounts of cannabis use being associated with higher BMI among adolescents. However, above average DM performance appeared to mitigate these effects.

Financial support: R01 DA033156 & R01 DA031176 to Raul Gonzalez, PhD.

<http://dx.doi.org/10.1016/j.drugalcdep.2015.07.520>

Identification of novel allosteric dopamine transporter ligands with nanomolar potency



Richard B. Rothman^{1,*}, John S. Partilla¹, S.K. Saini², O. Moukha-Chafiq², V. Pathak², Michael H. Baumann¹, S. Ananthan²

¹ IRP, NIDA, NIH, Baltimore, MD, United States

² Southern Research Institute, Birmingham, AL, United States

Aims: Published studies have described novel allosteric modulators of the dopamine transporter (DAT). N-(diphenylmethyl)-2-phenyl-4-quinazolinamine (SRI-9804),