
Book Reviews

Compiled by Susan Savva & Griffith Edwards

Treatment Matching in Alcoholism (an International Research Monograph in Addictions)

THOMAS F. BABOR & FRANCES K. DEL BOCA, eds
Cambridge, UK, Cambridge University Press, 2003,
275 pp., €55, \$75, ISBN 0521 65112 3

'Less is more' is a maxim that applies to many areas of life, including, it would seem, reporting results from a large-scale, complex research project. Project MATCH, funded by the US National Institute on Alcohol Abuse and Alcoholism to study matching clients to alcohol treatments, was such a project. It had two separate arms (Outpatient and Aftercare), three treatment conditions [Twelve-Step Facilitation (TSF), Cognitive-Behavioral Treatment (CBT) and Motivational Enhancement Therapy (MET)] provided by 80 therapists, 10 primary matching variables, 10 secondary matching variables, an additional potential (exploratory) matching variables, two primary outcomes [percentage days abstinent (PDA) and drinks per drinking day (DDD)], several secondary outcomes, including a composite outcome index, extensive baseline assessment and repeated assessments during a 3-month treatment period and a 1-year follow-up period, and, for the Outpatient arm, an additional assessment at a 3-year follow-up point. In addition to testing the main effects of the treatment conditions, the main (prognostic) effects of the matching and other client variables, therapist effects, site effects and the interactions of treatment and matching variables, the Project MATCH Research Group also probed the causal chains presumed to underlie hypothesized matching effects. Prior to the publication of *Treatment Matching in Alcoholism*, more than 125 articles, chapters and monographs had been published to convey the structure, methods and findings of this complex project. *Treatment Matching in Alcoholism* describes the project and its results in a concise, clear form and therefore will be a very valuable reference work for alcohol treatment researchers and providers who have some familiarity with the project, and an excellent source from which to learn about the project for interested individuals who have not followed its progress over the past decade.

Consisting of 13 chapters written by different members of the Project MATCH Research Group and consultants, the book is divided into three parts: Part I describes the background and design of the study; Part II presents results, including findings on the effects of therapists, the therapeutic alliance, and participation in Alcoholics

Anonymous; and Part III provides conclusions and implications. Chapters 7 and 8 convey results on the main effects of treatment conditions and matching variables, and their interactions over time in relation to the two primary drinking outcomes indices (PDA and DDD). In both arms, no significant main effects for treatment conditions were found on PDA and DDD. As noted in the volume, these findings are important in two respects: first, they indicate that a 12-Step-based treatment can achieve the same outcomes as CBT (see also Ouimette *et al.* 1997; Morgenstern *et al.* 2001). In previous reviews of alcohol treatment research findings, CBT was cited frequently as having empirical support, whereas no support was available for 12-Step-based treatment. Secondly, the findings indicate that MET, a less intensive treatment, when spread out over a 12-week period, can achieve similar outcomes to once-a-week treatments (TSF and CBT) provided over the same period. Whether similar effects for MET would obtain among clients not undergoing 6–8 hours of baseline assessment and not followed-up every 3 months in the year after treatment ended remains to be determined. Intensity of assessment is cited as perhaps masking matching effects; it also may have masked treatment intensity main effects.

Regarding findings on patient–treatment interaction effects, the authors struck what I thought was an appropriate balance between acknowledging the modest support for matching overall (four of 21 primary/secondary matching variables received some support—anger, social support for drinking, severity of alcohol dependence, and psychiatric severity) and considering the clinical implications of the findings that achieved statistical significance. Enthusiasm for the clinical implications of the significant interaction effects was tempered, however, by recognition that 'there is no clear way to determine a proper match when the multiple matching criteria yield conflicting treatment assignments' (p. 223).

A site by treatment interaction was found in the Outpatient arm, indicating variation in treatment main effects across sites. Indeed, 'each of the three treatments had at least one site at which it did better than the other two, and at least one site at which its outcomes compared unfavorably with the others' (pp. 217–218). Such variation in treatment main effects across sites rigorously following a common protocol must give pause to anyone who desires to synthesize the relative effects of the 'same' treatment approaches as implemented and evaluated in

varied ways across multiple single-site studies. The discussion of the variation in treatment main effects across out-patient sites is just one way in which the volume admirably achieves one of its goals: to convey what was learned in Project MATCH 'about the limits of clinical science' (p. xv). Overall, *Treatment Matching in Alcoholism* is a well-written, highly accessible record of the conduct of, and findings from, a landmark alcohol treatment research project. The volume provides thoughtful, tempered consideration of the implications of Project MATCH's findings for clinical practice and research. As noted in the volume's final sentence: 'If the findings reported in this volume give an unexpected and not always flattering answer to the matching question, so are they likely to establish new insights, new standards, and new questions to pursue' (p. 237).

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DECLARATION OF INTEREST

Although the author was not involved directly in the conduct of Project MATCH, he was asked by the US National Institute on Alcohol Abuse and Alcoholism (NIAAA) to review a draft Request for Applications for Project MATCH, he was a member of the NIAAA review committee that evaluated Project MATCH applications and he was a member of the Project MATCH Data and Safety Monitoring Board.

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Basic and Clinical Science of Opioid Addiction.

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MARCUS F. KUNTZE, F. MÜLLER-SPAHN, DIETER LADEWIG & ALEX H. BULLINGER, eds

Basel, Karger, 2003, 71 pp., SwF88; €63, \$76.50, ISBN 3 8055 7504 1

This volume, from S. Karger AG Basel, Switzerland, sprang from symposia of the same name held in 1998 and 2001 at the Psychiatric University Clinic of Basel, well known for scientific meetings regarding 'opioid-assisted treatment'. The overall aim of this booklet, we are told, is to 'shed some light on opiate-assisted treatment' and this is achieved under different section headings. The first, 'Treatment and Research', details from a very Swiss perspective the availability of oral methadone, diacetyl morphine and buprenorphine on a supervised basis.

Opiate-assisted treatment paid for by health insurance is offered based on the WHO framework for the classification of substance use disorders (ICD-10 F1). Programmes seem incredibly well structured, with mini-drug-czars ('Kantonsarzt') conducting annual treatment surveys. There is a 'spontaneous notification system' regarding undesired incidents during treatment, which has identified anaphylaxis as occurring in 14/1000 cases; interestingly, the same rate as adverse events with respiratory depression.

The Swiss have a well-documented heroin prescription treatment programme, which serves 4% of the estimated 30 000 opiate addicts in Switzerland. They have a structured system for evaluation called 'PROVE 94–96'. This section of the booklet also houses two research reports, a prospective follow-up study of the Geneva heroin programme and a review of opiate detoxification by a Dutch group from the University of Essen.

The second section focuses on methodology and contains a theoretical piece covering general therapeutic strategies. There is a useful critique of the 'Randomized Controlled Clinical Trial' for opioid-assisted treatments which would make good reading for the aspiring addiction researcher. Similarly, p. 37 has a tremendously useful short section entitled 'Indicators of effectiveness'.

A fascinating section on neuroscience follows and a refreshingly honest review of 'Brain imaging in opiate addiction' by a German group (Heinz, Smolka & Mann). This article neatly covers the major techniques but owns up to the fact that the 'current database is not without contradictions'. The considerable variance in individual responses to psychoactive substances being noted as a major problem.

I enjoyed the description of the neurological sequelae of substance misuse by Stohler which were listed as six discrete entities and wonder whether the knowledge that hypercapnia and hypoxia are significant risk factors for such sequelae should be advertised more widely or that spongiform leukoencephalopathy is particularly associated with chasing-the-dragon.

Finally, the inclusion of the case by the psychotherapist Nicola was a mystery. Not that it was not interesting;

it was—but the point of its inclusion in this rather scientific-research led booklet was lost on me.

In summary, a good book with interesting material and a useful resource for policy makers and practitioners alike.

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Reefer Madness: Sex, Drugs, and Cheap Labor in the American Black Market

ERIC SCHLOSSER
Boston, Houghton Mifflin, 2003, 320 pp; \$23 cloth, ISBN 0 618 33466 1

Despite moments of compelling reportage, *Reefer Madness* is an uneven book, one that never quite reconciles two different objectives. Schlosser's first aim is descriptive, to examine the underside of the American economy. What he finds there is predictably unflattering: a nation of hypocrites who indulge pot, porn and cheap fruit, the latter courtesy of illegal immigrant labor. His second aim is evaluative, to judge attempts to suppress or regulate these activities. Are we better off when the government intervenes in the working of the market?

Schlosser thinks those who exploit illegal labor should be prosecuted. He concedes that marijuana can be harmful for teenagers who experience enough social and emotional confusion without the added handicap of constantly being stoned, but he finds the criminal justice response grotesquely disproportionate to the marijuana problem. Statutory changes since the 1980s have meant lengthy, sometimes life-long sentences for marijuana traffickers, notably those with prior convictions who refuse to name other offenders. (Professional informers will even sell incriminating information to defendants so they can reduce their sentences by cooperating with prosecutors.) Evoking Bentham's dictum that excessive punishment is just so much misery run to waste, Schlosser calls for decriminalization of personal marijuana possession and reform of sentencing and forfeiture laws as they apply to those caught with large amounts. What constitutes a large amount, or what to do about harder drugs, he does not say.

Schlosser makes some telling points. Suppression has not made much of a dent in marijuana use. Cannabis has become a huge cash crop in the American heartland, while other cultivators have taken advantage of grow-lights and hydroponics to expand indoor production. The marijuana crusade is as much about politics as public health. Schlosser is on the mark in his criticism of the

Clinton administration, which acquiesced to the continuation of the Drug War while curtailing federal obscenity prosecutions. Tolerating pornography entailed fewer political risks than marijuana smoking by the young.

A logician would fault Schlosser for relying on *ad horrendum* stories and failing to consider what offsetting benefits, intended and unintended, marijuana laws may have produced. Legal pressure can compel compulsive users to enter treatment. Pressure on drug-trafficking suspects can lead to breaks in other criminal investigations. US crime rates have declined since the early 1990s, partly because incarcerated drug traffickers could not commit street crimes. Historically, the ranks of drug traffickers and pornographers have included some dangerous sociopaths. Suppose that assassin James Earl Ray, who dabbled in both occupations, had been jailed on a smuggling or obscenity conviction in early 1968. Martin Luther King Jr might still be alive. Selective example? Certainly. Emotionally manipulative? Of course. But so is Schlosser's unbroken parade of harmless-guys-doing-hard-time. His conclusion—rationalize the marijuana laws—is sounder than his one-sided case. Anyone making a consequentialist argument should consider all the consequences, not just those that appeal to readers' sense of fairness.

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Cross-National Drug Policy (Annals of the American Academy of Political and Social Science, Vol. 582, July 2002)

ROBERT MACCOUN & PETER REUTER, eds
Thousand Oaks, CA, USA, Sage Publications, 230 pp., \$32, ISBN 07619 2744 1; ISSN 0002 7162

Drug policies vary sharply from country to country, even between countries otherwise seemingly quite similar, and sometimes a given country will abruptly change directions; nor are the policies easily arrayed along a one-dimensional soft-to-tough spectrum.

Those observations suggest a political-science puzzle: what explains the variations in drug policies across countries and over time? International and intertemporal variations also offer a tantalizing research strategy for measuring the impacts of drug policy on the drug problem, where 'drug problem' means not only the extent of drug abuse but also the damage drug abuse does to those who abuse drugs and, through them, to others, and the damage done by the control policies themselves.

As MacCoun & Reuter note in their preface, four barriers stand between us and being able, for example, to

learn from Dutch experience what the impact would be if some other country carried out a semiformal legalization of the sale of retail quantities of cannabis.

First, the data are scarce so many of the results of interest have never been measured, in the Netherlands or elsewhere. Secondly, the data of are poor quality, so even measured outcomes may be measured with so much noise as to drown out any signal. Thirdly, any causal inferences are shaky, because observing the coexistence of a given policy and a given condition is no assurance that the condition resulted from the policy rather than from some other factor. Fourthly, generalizations are dangerous, because even if we knew how Dutch policies had influenced Dutch cannabis use rates we would have no assurance that similar policies in the United Kingdom or the United States would have comparable effects on use rates in those countries, given their very different social settings. (I would add a fifth factor: if the discussion restricts itself to illicit drugs, rather than considering alcohol as well, it ignores about four-fifths of the total volume of intoxication and of problem intoxicant use. A country with a relatively small amount of 'drug' use and a relatively large alcohol problem has been less successful in dealing with its intoxicant problem than a country where the reverse is true, but a focus on 'drugs' would only conceal that fact.)

Nevertheless, the temptation to reason by analogy is virtually impossible to resist. After all, what else is there to substitute for the raw assertion that makes up so much of the drug policy debate in virtually every country?

Cross-National Drug Policy stands as a kind of companion volume to *Drug War Heresies*, MacCoun & Reuter's masterful essay on comparative drug policy (MacCoun & Reuter 2001). The current volume provides tantalizing

hints of answers to both analytical questions, as well as a wealth of material about the actual processes and details of drug policy in France, Portugal, Sweden, Denmark, Canada, Australia, Colombia, Jamaica, Mexico, Iran and Russia. Reading it will reward not only those concerned with drug policy specifically, but those who want to know about an important but ill-studied aspect of social policy and social conditions in the countries involved. The quality of the essays is higher and less uneven than that of the average journal special issue or edited volume, but the skill of the chapter authors cannot overcome fully the sheer difficulty of establishing what is going on and why.

For example, having read the essay by Leif Lenke & Boerje Olsson, the reader will be able to formulate more precisely the question of whether Sweden's success in achieving both lower rates of illicit drug use and lower drug-related imprisonment than Switzerland means that its notoriously inflexible and punitive policies have succeeded, or rather that only a country without much of a drug problem can maintain such policies; but, alas, formulating such questions precisely is one thing, answering them convincingly quite another.

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