

## Preface

This book uses a clinically oriented approach for working with patients and clients with substance-use disorders. The material represents a blending together of my three major professional roles as a clinician, teacher, and researcher. The overall goal is to help the busy clinicians feel comfortable with their level of understanding of alcohol and other drug-related disorders, and to offer the best clinical care possible.

The first edition of this text, published in 1979, grew out of my need to place the 200 or so drugs of abuse into a clinically useful perspective. There was no way I could remember each and every drug, and I faced a challenge when a new drug (or perhaps an old substance with a new name) was introduced. I learned that I can place these substances into a limited number of categories based on the usual clinical effects, thereby creating groups similar in the quality of intoxication, associated physiological changes, and patterns of problems likely to be observed in the context of intoxication and withdrawal. This clinically oriented and pragmatic approach remains the core of this book, continuing to be as useful to me today as when the first volume was published.

Of course, over the years, many details have changed. First, the diagnostic criteria have evolved from DSM-II to DSM-III in 1980, DSM-III-R in 1987, and DSM-IV in 1994. I was fortunate to hold the Chair of the DSM-IV Substance Use Disorders Workgroup, and to participate in one of the committees leading to DSM-V. Therefore, each edition of the text has had the opportunity to offer some perspectives on the most recent diagnostic systems. Over the years, the patterns of substance use in populations have gone up, come down, and sometimes gone up again, while our understanding of pharmacology, physiology, and genetic influences has continued to expand at a rapid rate. These historical issues and background on epidemiology and physiology have formed the basis for the first half of each chapter dedicated to a category of drugs (e.g., depressants, opioids, stimulants, cannabinoids,

and so on) and have been updated with each new edition. The second half of each current substance-oriented chapter offers a clinically oriented presentation of recent developments in the treatment of substance-related conditions, many of which represent expansions of our understanding of the cognitive behavioral core of treatment, along with the development of new pharmacological approaches. Chapter 14 is dedicated to reviewing the current status of rehabilitation approaches in an effort to pull together much of the information presented within the previous drug category-oriented chapters.

Therefore, the structure of the book reflects my background as both a clinician and teacher. The specifics, however, rest with my training as a researcher. About 80% of the references in this sixth edition have been published since 2000. The References for each chapter give the reader the opportunity to learn more about specific topics offered within the text, with references given as more of a general background, rather than a highly linked statement based on each reference.

In addition to a thorough updating of the References, the sixth edition incorporates another important change. In the course of developing the five previous editions, and as a consequence of the consistent and impressive increase in knowledge in our field, the number of chapters and pages increased across the five editions. As I looked at the version of this book published in 2000, I felt that if the length of the text continued to expand, it would do so at the potential cost of limiting the usefulness and clinician-oriented emphasis of the work. Therefore, the sixth edition has been streamlined by deleting two previous chapters (the section on phencyclidine has been folded into the overall chapter on hallucinogens and the thoughts on prevention have now been incorporated into Chapter 1). At the same time, efforts have been made to shorten each of the remaining chapters whenever possible.

Finally, this remains a single-author text. This facilitates consistency across chapters in both philosophy and writing style. Having said that, this work has been strongly influenced by many people in this field, including, but not limited to, authors cited in the References for the various chapters. In addition, this text could not have been accomplished without the help of the wonderful people in my office. Emily Wick worked day and night to help me place the chapters into a final form, and has been indispensable regarding pinning down references. Lynnette Fleck transcribed the initial changes in the first several drafts of the updated chapters, putting up with my awful handwriting and, at times, my inability to sit still long enough explaining things. Finally, everything that comes out of my office reflects the dedication, warmth, and support of Marcy Gregg and Tom Smith. I would be lost without any of them.

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