

Leading addiction experts call for more neuroscience research on long-term recovery

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Warren Bickel, a professor at the Virginia Tech Carilion Research Institute, penned an article with Keith Humphreys, a professor at Stanford University, outlining how to address the problems and find the solutions of long-term recovery from substance abuse. Credit: Virginia Tech

September is addiction recovery month, and, in the midst of the current

opioid epidemic, it's an apt moment for addiction research experts to map the future path forward for a long-term recovery strategy for substance abuse. Warren Bickel, the director of the Virginia Tech Carilion Research Institute (VTCRI) Addiction Recovery Research Center, and Keith Humphreys, the Esther Ting Memorial Professor in psychiatry and behavioral science at Stanford University, called their colleagues to action in an article published in *JAMA Psychiatry*, a journal of the American Medical Association.

"More than 25 million people in the United States smoke cigarettes, and more than 20 million people meet diagnostic criteria for other substance use disorders," said Bickel, who also co-directs the VTCRI Center for Transformative Research on Health Behaviors. "That said, there are also more than 25 million Americans who have been in [recovery](#) for years, for decades. There's hope here."

Bickel pointed to the International Quit & Recovery Registry (IQRR) as an important research tool to advance understanding of long-term [addiction](#) recovery. Utilization of this tool could lead to better treatments for individuals who are not yet able to maintain long-term recovery, according to Bickel.

The IQRR, sponsored by VTCRI, has nearly 8,000 registrants from all 50 states, 40 countries, and five continents. Registrants' recovery times, from a variety of addictions, range from less than a year up to more than 20 years. Eighty-three percent of the participants identified two or more substances as their addictions of choice.

"This is the only registry of its type in the world, to my knowledge," Bickel said. To respect privacy, registrants do not have to submit their names. They are asked to provide a valid email address, zip code, and information about their addiction. "We're learning about the circumstances leading to addiction, the choices leading to recovery, and

the social and cultural environments for people working through addiction."

Researchers have learned that addiction physically changes the brain, Bickel said, and ongoing research in the field has started to probe how even the briefest abstinence can change the brain further. The contributions from these studies are significant, according to Bickel and Humphreys, but they're not enough.

"There's a clear need for advancement in our knowledge of recovery processes. We need more information—basic information—about how the brain functions and heals during recovery," Bickel said. "Increasing the number of neuroscience studies and including longitudinal designs to understand how a person's brain changes after a few years or a few decades in recovery could have substantial clinical, scholarly, and public policy benefits." Bickel and Humphreys plan to further address the questions they raised in their article, in anticipation of fostering more neuroscience research focused on long-term recovery from addiction.

"Understanding long-term recovery is important for science and for society," Humphreys said. "For science, unraveling the nature and treatment for medical disorders requires us to understand both the cause of disease, the course it takes, and the recovery—but in the addiction field, we have focused almost entirely on the first two. For society, while many people understandable despair over the horrors of the opioid epidemic, the reality of recovery gives us hope that happy and healthy lives are possible for those currently suffering."

More information: Keith Humphreys et al, Toward a Neuroscience of Long-term Recovery From Addiction, *JAMA Psychiatry* (2018). [DOI: 10.1001/jamapsychiatry.2018.0956](https://doi.org/10.1001/jamapsychiatry.2018.0956)

Provided by Virginia Tech

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