Centers for AIDS Research (CFAR) Network of Integrated Cohort Studies (CNICS)

http://www.uab.edu/cnics/
CNICS is an electronic medical records-based resource network that integrates clinical data from the large and diverse population of HIV-infected persons in the modern HAART era. As of 2015, CNICS contained 31,824 patients; 82% male and 18% female. Types of data included are demographic, diagnosis, laboratory, medication, utilization, vital status, patient-reported outcomes, antiretroviral, and specimen data, longitudinal data, and validated outcomes. The process to access CNICS data is fairly complicated and requires an application. Dr. Heidi Crane at the UW & Harborview may be able to advise about access. hcrane@u.washington.edu

How It’s Been Used at ADAI and UW:
- Bryan Hartzler, UW ADAI: Analysis of CNICS Data to Inform Design of Interventions to Enhance HIV Care among Substance Abusers (CNICS 093).
- Heidi Crane, UW Allergy and Infectious Diseases: Body Morphology Abnormalities & Patient Reported Outcomes: Depression, Adherence, Health-related Quality of Life, Substance Use, Physical Activity, & Sexual Risk Behavior. (CNICS 035); and Alcohol Research Consortium in HIV – Epidemiological Research Arm (ARCH-ERA). (CNICS 068)

Behavioral Risk Factor Surveillance System (BRFSS)

http://www.cdc.gov/brfss/index.html
BRFSS is created by the Centers for Disease Control and Prevention (CDC); it is the nation's premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. Established in 1984 with 15 states, BRFSS now collects data in all 50 states as well as the District of Columbia and three U.S. territories. BRFSS completes more than 400,000 adult interviews each year, making it the largest continuously conducted health survey system in the world. Data file documentation can be found at http://www.doh.wa.gov/DataandStatisticalReports/VitalStatisticsData/OrderDataFiles.aspx.

How It’s Been Used at ADAI:
Susan Stoner acquired Washington State BRFSS data sets for 2011-2014 (most recent year available) specifically to extract data on adult use of marijuana for the Factsheet Marijuana Use by Older Adults. BRFSS data has a lot of other potential for use. Contact Susan re: access and use: sastoner@uw.edu

NIDA Data Share
https://datashare.nida.nih.gov/

National Drug Abuse Treatment Clinical Trials Network (CTN). NIDA Data Share was created to make the NIDA CTN data available to as wide an audience as possible. As studies are completed and their data become available, this web site will be linked to those data. Each CTN study has the following information: study protocol; reference to primary outcomes paper; data sets in SAS and ASCII; annotated case report forms; data dictionary); and study-specific de-identification notes.
Data Sets and Resources Available to ADAI & Other Researchers

How It’s Been Used at ADAI:

• Dennis Donovan, Betsy Wells et al used data from CTN-0031 (“Stimulant Abuser Groups to Engage in 12-Step (STAGE-12)”) to examine whether level of exposure to the STAGE-12 intervention, a 12-step facilitative therapy, is related to treatment outcome. (J Subst Abuse Treat 2014;47(4):265-27).

• Mary Hatch-Maillette and colleagues used data from CTN 0015 (Women’s Treatment for Trauma) to study the association between therapeutic alliance and treatment outcomes among 223 women with PTSD and substance use disorders. (Subst Use Misuse 2012;47(6):695-707).

• Bryan Hartzler and Dennis Donovan have also published numerous papers using CTN data. To find these, search for their last names in the CTN Dissemination Library: http://ctndisseminationlibrary.org or contact Bryan and Dennis.

NIDA Division of Pharmacotherapies and Medical Consequences of Drug Abuse (DPMCDA)
NIDA’s DDPMCDA plans and directs studies necessary to identify, evaluate, and develop medications to treat substance use disorders (SUDs). The Division develops and administers a program of basic and clinical research to develop innovative pharmacological (both chemical and biological) approaches to treat SUDs. This program is implemented through collaborations with academia, industry (pharmaceutical and biotechnology companies), and other government institutions (e.g., the Veterans Administration and the FDA). The Division also coordinates and provides leadership in the area of medical conditions associated with SUDs, including but not limited to HIV/AIDS.

National Epidemiologic Survey on Alcohol and Related Conditions (NESARC)
The NESARC is a longitudinal survey implemented by the National Institute on Alcohol Abuse and Alcoholism, and is the largest comorbidity study ever conducted, with over 43,000 participants. The target population of the NESARC is the non-institutionalized household population, 18 years and older, residing in the United States including the District of Columbia, Alaska, and Hawaii. The sample provides estimates for the nation as a whole on topics related to alcohol and drug use, abuse and dependence and their associated psychiatric disabilities. Wave III has been completed (ADAI does not have Wave III data). http://clinicaltrials.gov/ct2/show/NCT01273220

NOTE: NIAAA does not make NESARC data available anymore, so researchers must get the NESARC dataset & data dictionary from researchers who already have it. ADAI acquired the NESARC datasets for Waves I and II so that ADAI and other UW researchers are able to use it.

How it’s Been Used at UW:

• Lisa Cubbins, affiliated with the UW Centers for Public Health Research and Evaluation and Health Disparities Research conducted a NIDA-funded study on Immigration Effects on Substance Abuse, Mental Health, and Treatment Gaps. The project examined differences in alcohol use, drug abuse, mental health, comorbidity, and treatment for substance abuse and mental health problems between immigrants to the U.S. and native born U.S. citizens, using data from NESARC.

• Ashley McLure Loving used NESARC data in her UW dissertation research to study stressors and coping mechanisms that may influence alcohol use patterns among Native Americans, using a Modified Historical Trauma Model. She used Wave 2 data to examine patterns of drinking status, frequency and actual consumption of specific alcoholic beverage preference, and binge drinking.
Data Sets and Resources Available to ADAI & Other Researchers

Treatment and Assessment Report Generation Tool (TARGET)
https://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/target
Publicly funded drug treatment admissions for 525 reporting agencies throughout Washington state. Admission records for all publicly funded drug treatment in WA State from 1999 onwards, with a 3 month lag for current data. These are de-identified data which can be accessed via a web interface to run cross tabs. Caleb Banta-Green has access to the TARGET database at ADAI.

How it’s Been Used at ADAI:
• Currently used for drug epidemiology purposes. Can be useful background information for grant applications. System is likely to be replaced in 2016.

Fetal Alcohol & Drug Unit Data Sets
Contact: Therese Grant, PhD, Director FADU, Associate Director, ADAI, Professor, Psychiatry and Behavioral Sciences, Professor, Psychiatry and Behavioral Sciences. http://depts.washington.edu/fadu/ Email granttm@uw.edu

Parent-Child Assistance Program (PCAP)
A database of variables from over 2200 women enrolled in the Parent-Child Assistance Program, including pre/post Addiction Severity Index assessments, Silencing the Self Scale, and other measures.

How It’s Been Used at ADAI:
• PCAP research and publications, including investigators and co-authors from Health Sciences, Psychiatry, Epidemiology, SAMHSA.
• Graduate students at UW and SPU answering research questions for thesis, dissertation, and capstone projects, e.g. examining PCAP outcomes among Native American women vs others; PCAP outcomes among participants with Fetal Alcohol Spectrum Disorders vs. others.
• WSU faculty researchers answering questions about rural vs. urban access to substance abuse and mental health services; answering questions about tobacco use and cessation among high-risk pregnant women.

Baby/Mom Study
A database including Ages and Stages Questionnaire variables and videotaped infant-mother play interactions from a 12-month infant/mother mental health intervention (N=40 infant/mother pairs receiving PCAP plus intervention and 40 infant/mother control pairs).

How it’s Been Used:
• Doctoral student at SPU basing her dissertation on assessment of videotaped infant-mother interactions.

Streissguth Repository
This is a data repository begun by Dr. Ann Streissguth in 1984 and continued for 22 years over a series of studies. It includes demographics, standardized structured interviews, neuropsychological, developmental, behavioral, and physiologic measures from 898 cases with fetal alcohol spectrum disorders (FASD), and 89 controls.

**How it’s Been Used at ADAI:**
- Drs. Sandra Radin and Ed Riley exploring potential for studying FASD among older adults, including comparing changes in MRI findings over time.

**Seattle 500**
A database assembled during a longitudinal prospective study conducted by Dr. Ann Streissguth and colleagues. Seattle 500 tracked approximately 500 individuals from birth through age 32 (1973-2005) who had varying levels of prenatal alcohol exposure, in order to determine dose/response alcohol effects over time. Data were collected using dozens of instruments to assess prenatal conditions, and cognitive, motor, psychological, neuropsychological development.

**How it’s Been Used at ADAI:**
- Drs. Sandra and Joe Jacobson (Wayne State University) are submitting a NIAAA grant to conduct secondary analysis using this database and three others to examine the threshold of drinking behavior that affects neurodevelopmental outcomes.