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Background & Aims

- Individuals who have experienced **childhood trauma** (e.g., previous family history of drug use or sexual abuse) are more likely to develop **substance use disorders** (NIDA, 2019; Rhee et al., 2019).
- Relations with childhood trauma and drug reinforcement have rarely been investigated outside of self-report.
- Behavioral Economics (BE)** is a useful tool for understanding drug reinforcement (Reed et al., 2016; Johnson & Bickel, 2006) and may have implications for treatment (Strickland et al., 2019).

Study Aim: To understand potential relations between adverse childhood traumas and behavioral economic indices of drug demand (e.g., rate of change in elasticity and intensity).

Methods

- 35-minute online study conducted on Amazon MTurk.
- Participants**
 - Adults ages 18-90 with a 12-month history of using opioids ($N = 50$), read, write, and understand English, in the U.S., and $\geq 95\%$ approval rating.
- Measures**
 - Behavioral Economic Purchase Task** – 17 prices (\$0 - \$20)
 - e.g., “How many pills of your typical opioid would you purchase and consume in the hypothetical 24-hour period at the price of \$4 (i.e., \$4 per pill)?”
 - DSM – V Diagnosis for Opioid Use Disorder (OUD)** – 11 items
 - e.g., “Have you had a strong desire or urge to use opioids?”
 - Experience Pain** – 1 item
 - “Do you suffer from chronic pain and/or any kind of pain?”
 - Adverse Childhood Experience (ACE) Questionnaire** – 14 items
 - Drug family history** – “Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?”
 - Sexual abuse history** – “Did an adult or a person at least 5 years older than you ever touch or fondle you or have your body touched in a sexual way?”
- Data Analysis**
 - Removed nonsystematic data (Stein et al., 2015), $n = 16$.
 - Exponentiated demand equation (Koffarnus et al., 2015); $k = 2.36$.
 - Mann-Whitney U tests to examine group differences.

Results

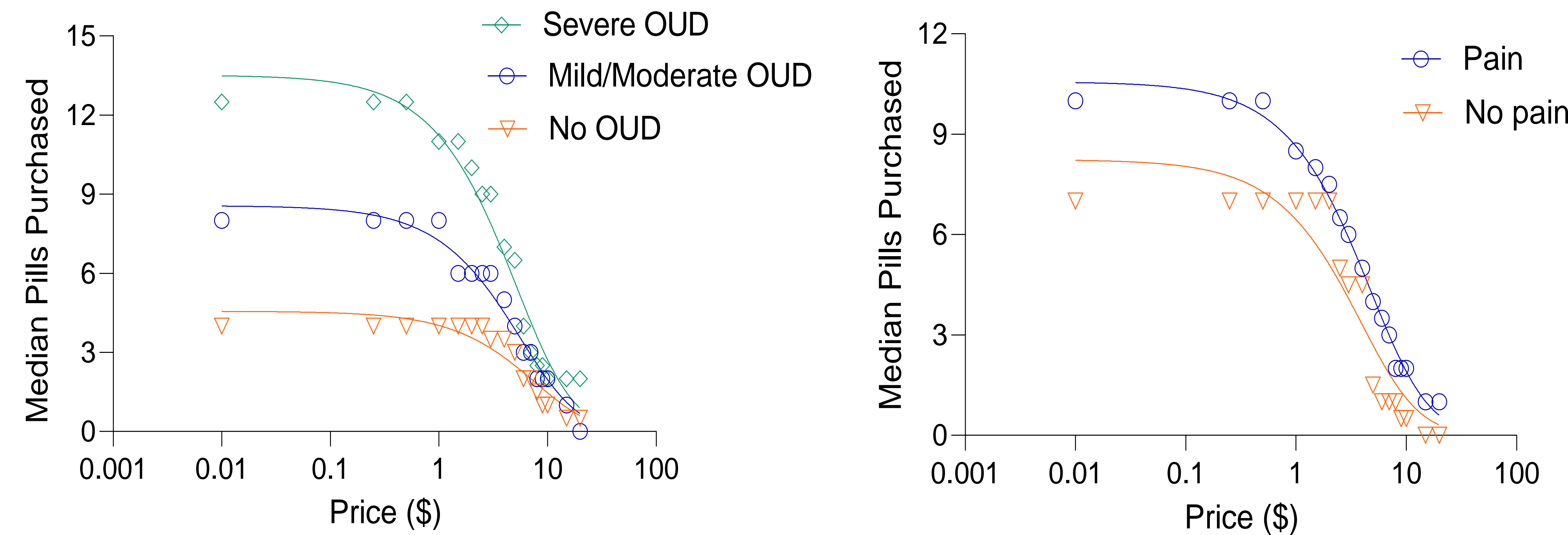


Figure 1. Simulated purchasing by OUD status (left panel; $n = 16$ Severe; $n = 27$ Mild/Moderate; $n = 6$ No) and experiencing a pain condition (right panel; $n = 38$ Pain; $n = 12$ No Pain). Lines represent the nonlinear regression fit of the exponentiated demand equation (Koffarnus et al.) to the median data points. R^2 range .70 - .98. OUD = opioid use disorder; Pain = chronic pain and/or any kind of pain.

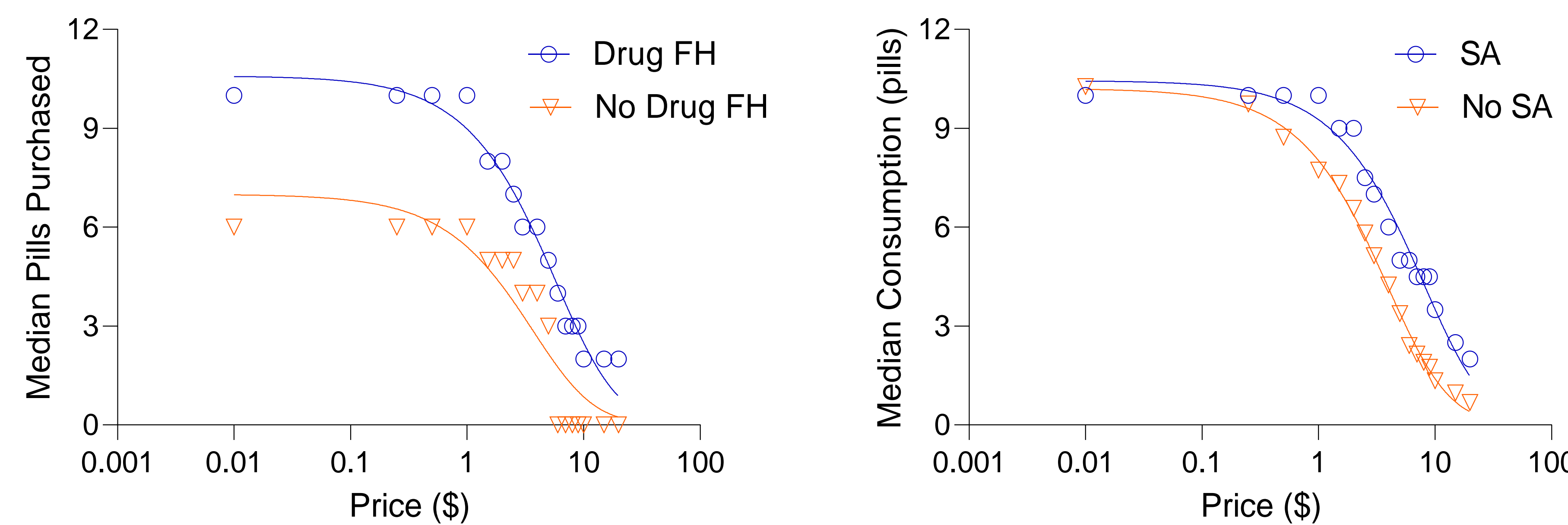


Figure 2. Simulated purchasing by family history of drug use (left panel; $n = 25$ Drug FH, $n = 25$ No Drug FH) and sexual abuse history (right panel; $n = 18$ SA; $n = 32$ No SA). Lines represent the nonlinear regression fit of the exponentiated demand equation (Koffarnus et al.) to the median data points. R^2 range .88 - 100. Drug FH = family history of drug use; SA = sexual abuse history.

Table 1. Sample Characteristics

Age [M (SD), range]	38 (9.2), 21-64
Gender [n, (%)]	
Female	22 (44)
Male	26 (52)
Non-binary	2 (4)
Experience pain	38 (76)
Opioid use disorder	43 (86)
ACEs [M (SD), range]	5 (3.6), 0-13
Experienced a drug overdose in their lifetime	16 (32)

Results

Table 2. Opioid demand parameters (median)

	Intensity (Q_0)	p	Elasticity (α)	p
Severe OUD	14.45	+	0.00282	
Mild & Moderate OUD	9.05	+	0.00334	
No OUD	4.36		0.00553	
Experience daily pain	10.27		0.00319	
Do not experience daily pain	8.15		0.00462	
Previous family history of drug use	10.68		0.00304	*
No previous family history of drug use	6.63		0.00407	
Sexual abuse history	10.72		0.00184	**
No sexual abuse history	9.38		0.00394	

Mann-Whitney U tests were conducted to compare groups. Note: ** $p < .01$; * $p < .05$. Statistical comparisons were made between Severe and Mild OUD to No OUD. + $p < .05$.

Discussion

- Data collection is ongoing. These preliminary analyses suggest additional comprehensive analyses are warranted with a larger sample.
- These data add to the childhood trauma literature, quantifying the influence of adverse childhood experiences on demand for opioids.
- These data support the potential of demand as a clinically useful measure of drug valuation that is sensitive to individual difference variables.
- Demand curves offer multi-dimensional valuation of drug reinforcement, with differences in utility of various demand metrics (e.g., intensity vs elasticity) depending on previous experiences/histories.
- Elasticity is sensitive to family drug history and sexual abuse.
- Trending sensitivity of intensity across pain and family drug history.
- Divergent sensitivity of intensity across family drug history and sexual abuse.
- Replicated Strickland et al. (2019) findings when comparing demand for opioids among people with no OUD to those with OUD.
- Limitations: small sample size, crowdsourcing platform, lack of diversity, and self-reported opioid use.

For references or questions please contact: avasquezferreiro@ufl.edu