Reviewer's report

Title: Relationship between craving and personality in treatment-seeking women with substance-related disorders

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Version: 2 Date: 15 Oct 2002

Reviewer: Dr Samuel A Ball

Level of interest: A paper whose findings are important to those with closely related research interests

Advice on publication: Accept after discretionary revisions

This manuscript evaluated the association between craving for substances and personality traits in women, controlling for recent substance use, psychiatric symptoms, and demographic measures. The research question is interesting, the sample was of reasonable size and relevance, and the measures chosen are widely used in studies of substance abusers.

Compulsory Revisions

1) The writing style and syntax is incorrect or awkward in several places. A careful proofreading is needed.

2) The instrument name is NEO Personality Inventory -Revised. The N, E, and O are not spelled out for this purpose.

3) The reason for evaluating the craving-personality connection in women needs to be clearly articulated.
   It is not sufficient to say that it should be studied because men and women are different, and it is too vague to simply mention that this may lead to different relapse prevention strategies.
   The authors should state the ways in which women and men are different that may be relevant for the study and how different personality-craving associations may have different clinical implication.
   I will suggest one way of thinking about this -- the authors may prefer another.
   Previous research has related Neuroticism and Impulsivity to craving and there are important gender differences for these two personality traits.
   Women tend to be higher on neuroticism and men tend to be higher on impulsivity.
   Thus, it would seem important to evaluate whether either of these traits or both or other traits are related to craving in women.
   In this context, such a comprehensive evaluation of personality with widely used instruments in substance abusers and controlling for relevant third variables is strength.
   Furthermore different gender-based personality-craving associations may suggest different strategies for craving control within a relapse prevention approach.
   For example, craving that is more related to impulsivity might suggest craving control through response delay, distraction, or alternative activities.
   Craving that is more related to neuroticism might suggest craving control through stress or mood...
management strategies. Some studies have shown that negative mood is a particularly relevant trigger for relapse among women. Thus, a study that tries to tease apart these complex associations in substance abusing women has merit and contributes to the literature. Again, this is just one suggested way to sharpen the relevance of this study for the reader.

4) The last two sentences of the Discussion are marginally relevant to this paper and should be dropped and replaced with a more thorough Discussion of issues related to #s 3 and 5 comments.

Discretionary Revisions

5) Although I am listing this as a discretionary recommendation, it is related to #3 above and therefore I would strongly urge the authors to consider this. The current statistical analysis approach uses partial correlation analysis to control for recency of drug use, anxiety, depression, education, treatment environment, and age. The purpose of this control is not articulated clearly for the reader and really is a less sophisticated approach than what would be provided by multiple regression. I assume that the authors want to see if the personality-craving association holds when controlling for these variables. It is clear to me why recency of drug use, anxiety, and depression should be controlled (although this should be spelled out for the reader), but the reason for including demographic and treatment setting variables is not clear. In addition, a more sophisticated question (and one which a step-wise regression can answer) is whether personality traits account for additional variance in craving after taking into account clinical states that are known to be related to both craving (and personality). In such a regression model the carving measure would be criteria and step 1 of the prediction model would enter the number of abstinent days in the first block. Then, step 2 of the model would involve entering the psychiatric symptoms measures (BDI, BAI) together as a block. Then, step 3 would involve entering all personality measures (NEO, TCI, BIS) as a block and looking at changes in R2 for the block and also the independent predictors. The general findings will probably hold and it will make a more powerful statement.

6) The authors might want to consider simply averaging the two craving measures. They are very highly correlated and including separate analyses of both does not contribute much other than doubling the number of comparison and therefore risk of Type I error. Given a correlation of .78, it is probably not accurate in the Discussion to refer to them as "distinct" measures.

7) The authors' explanation for why they did not find a relation between neuroticism, introversion, and craving seems to miss the mark. The control of anxiety (effect on neuroticism association) and depression (effect on introversion association) through the partial correlations is probably a more likely explanation than the use of different personality measures. The regression models should give a clue as whether the BDI and BAI are attenuating these personality-craving associations.

Competing interests:

None declared.