

Does user willingness to abstain influence the predictive value of craving on substance and alcohol use in addiction? Influence of treatment status on craving.

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Background: Craving is a proximal marker of use and relapse across substances in addiction. However, most studies on craving involved patients already in treatment. Could the observed prospective link between craving and use simply reflect efforts to quit within a treatment context, or does it exist independently of treatment access? The CUSEMA study aimed to examine whether the daily life relationship between craving and use was influenced by treatment status.

Methods: In a 14-day EMA study, "Active Users" from harm reduction programs and "Patients" from outpatient addiction programs, diagnosed with DSM-5 alcohol or substance use disorders, were included. Craving intensity and substance use were assessed four times daily. Multilevel mixed model was used to examine how treatment status influenced the relationship between craving and substance use.

Results: A total of 169 participants (61% males, mean age: 40.9 y.o.) were recruited: 60 "active users" and 109 "patients". Among EMA questionnaires, "active users" reported more intense craving ($p < 0.001$) and more frequent alcohol/substance use ($p = 0.005$) than "patients". Craving intensity was prospectively associated with a higher risk of substance use ($\gamma = 0.26$, $p < .001$) and this association was not modified by treatment context ($\gamma = -0.13$, $p = 0.12$).

Conclusions: These results underline the importance of craving as a core determinant of alcohol/substance use, regardless of the treatment status or abstinence / reduced use attempts, further documenting craving to be pre-existing potential "etiological" marker of addiction.

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