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A randomized double-blind study of neuroelectric therapy in opiate and cocaine detoxification.

[Gariti P](#), [Auriacombe M](#), [Incmikoski R](#), [McLellan AT](#), [Patterson L](#), [Dhopes V](#), [Mezochow J](#), [Patterson M](#), [O'Brien C](#)
J Subst Abuse 1992; 4:299-308.

Abstract

Prior research on the use of transcranial neuroelectric stimulation suggested that the application of low-amperage, low-frequency alternating current via surface electrodes placed in the mastoid region could relieve the physiological signs and subjective symptoms of withdrawal and craving during opiate detoxification. These effects were reported without gradual tapering of the opiate or the addition of other medications. To test the efficacy of one particular form of neuroelectric therapy (NET), a double-blind, randomized, placebo-controlled study was conducted comparing active NET and placebo NET in the treatment of withdrawal and stabilization of 18 opiate-dependent and 25 cocaine-dependent subjects. Scores on scales for measuring substance withdrawal and craving for each abused substance, as well as the multiple dimensions of mood, were compared for degree of difference across the 10 days of treatment. There was an overall completion rate of 88%, with both cocaine and opiate groups reporting a comfortable detoxification and substantial improvement over the course of a 12-day hospitalization. There was no significant difference between the active or placebo groups, suggesting that placebo was as effective as active NET in reducing drug withdrawal or craving during cocaine and opiate detoxification. However, all placebo patients received 0.2 mA of current, which may have provided a degree of active current. Suggestions are offered for future research.

MeSH

Adult; Cocaine; Double-Blind Method; Follow-Up Studies; Heroin Dependence; Humans; Male; Methadone; Opioid-Related Disorders; Substance Abuse Detection; Substance Withdrawal Syndrome; Substance-Related Disorders; Transcutaneous Electric Nerve Stimulation

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