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*Note to Eurekalert!: Please replace default contact info with the following:*

Contact: Contact: Bankole A. Johnson, MD,  
bankolejohnson@virginia.edu  
(434) 924-5457  
University of Virginia

Alcoholism: Clinical & Experimental Research

**Commentary: When creating a new institute, the devil's in the details**

- A recent decision was made to merge the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the National Institute on Drug Abuse (NIDA) into a yet unnamed institution
- Other leading scientists (including the leading alcohol researchers who co-authored the paper) believe that since alcohol is the most commonly used addictive substance in the U.S., merging the two institutes could significantly hinder the scientific understanding about alcohol problems and alcoholism
- According to the authors of the commentary, to avoid these potential pitfalls, seven critical themes must be addressed: Organizational structure, future advances in neuroscience, alcohol is not an average drug, comorbidity, increasing training, future growth and development, and new leadership

When the recent decision was made to merge the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the National Institute on Drug Abuse (NIDA) into a yet unnamed institution, there were a lot of questions as to how, and even why, it needed to be done. A commentary piece to be released in the April 2011 issue of *Alcoholism: Clinical & Experimental Research*, which is currently available at *Early View*, explores that subject in great detail to analyze its problems and present possible solutions.

One of the main issues, according to leading alcohol researchers who co-authored the paper, is that merging the two institutes could significantly slow progress in our scientific understanding about alcohol problems and alcoholism.

According to Bankole Johnson, Professor and Chairman of the Department of Psychiatry and Neurobehavioral Sciences at the University of Virginia and lead author on the paper, the goal of the commentary was to give people an explanation of all the possible challenges and opportunities that could arise from the creation of the new institute.

The commentary focuses on seven critical themes that must be addressed for a proper transition for NIAAA and NIDA: Organizational structure, future advances in neuroscience, alcohol is not an average drug, comorbidity, increasing training, future growth and development, and new leadership. According to Johnson, "maximizing these opportunities through critical thinking cannot be done without first increasing collaboration."

The decision to dissolve NIAAA and NIDA into one institute was made by the Substance Use, Abuse, and Addiction (SUAA) working group in 2010, based on the potential positives of the union. The National Institutes of Health (NIH) approved this decision in November of last year, and the planning on how to integrate so many different objectives, staff and materials is currently being discussed.

According to Johnson, the first step is defining the precise organizational structure of the new institution, followed by the appointment of a new leader who will understand both the alcohol and addiction research communities. It is very important to unite them, as both are different sides of the same coin.

"Alcohol is widely used and generally has low addiction potential," said Johnson. "However, because of the large number of users, the impact of alcohol-use disorders is highest for all drugs of abuse."

The idea of merging two separate institutes into a larger one has both opportunities and challenges, but there are a lot of aspects to be considered, both organizational and fiduciary, that must be worked out first. The key is to be aware of the "devil in the details," to be able to prepare and prevent any potential problems.

\*PLEASE NOTE: An accompanying piece to the commentary above appeared in the March 2011 edition of *Alcoholism: Clinical & Experimental Research* by Bridget F. Grant, Deborah A. Dawson, and Howard B. Moss titled “Disaggregating the Burden of Substance Dependence in the United States.” This article is quoted by Johnson et al. repeatedly and draws on some important research stating that alcohol dependence is almost five times as prevalent as dependence on any other illicit drug. Therefore, research on both alcohol and drug abuse can be mutually beneficial, which is something that Johnson et al. states as well.

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*Alcoholism: Clinical & Experimental Research* (ACER) is the official journal of the Research Society on Alcoholism and the International Society for Biomedical Research on Alcoholism. Co-authors of the ACER paper, “Should the Reorganization of Addiction-Related Research Across All the National Institutes of Health Be Structural? – The Devil Is Truly in the Details,” were Robert O. Messing of the Ernest Gallo Clinic and Research Center in the Department of Neurology at the University of California in San Francisco, along with Michael E. Charness from the VA Boston Healthcare System located in the Department of Neurology of Harvard Medical School at the Boston University School of Medicine and John C. Crabbe of the Portland Alcohol Research Center in the Department of Behavioral Neuroscience at the Oregon Health & Science University and VA Medical Center. Also contributing were Mark S. Goldman from the Alcohol & Substance Use Research Institute, part of the Department of Psychology at the University of South Florida, R. Adron Harris from the Section of Neurobiology, part of the School of Biological Sciences and the Waggoner Center for Alcohol and Addiction Research at the University of Texas at Austin, along with Henry R. Kranzler from the Department of Psychiatry and Treatment Research Center at the University of Pennsylvania in Philadelphia, Pennsylvania, Mack C. Mitchell Jr. of the Department of Internal Medicine of Johns Hopkins University School of Medicine and Johns Hopkins Bayview Medical Center in Baltimore, Maryland, and Sara Jo Nixon from the Division of Addiction Research and Psychiatry Department of the University of Florida. Additional co-authors of the commentary are Edward P. Riley and Jennifer D. Thomas from the Department of Psychology and Center for Behavioral Teratology at San Diego State University, Marc A. Schuckit of the Department of Psychiatry from the University of California, San Diego, and Kenneth J. Sher from the Department of Psychological Sciences at the University of Missouri-Columbia and the Midwest Alcoholism Research Center in Columbia, Missouri.

Journalists: A full copy of the manuscript may be obtained by contacting Mary Newcomb with the ACER Editorial Office at [AcerJournal@earthlink.net](mailto:AcerJournal@earthlink.net).