**INTRODUCTION**

Background

- Social phobia, panic disorder, and agoraphobia are common anxiety disorders (AD) among youths with substance use disorders (SUD).  
- Focus on the “false cluster” due to their similarities
- Comorbid ADs with SUDs associated with  
  - Suicide risk  
  - Poor school performance  
  - Lower QOL  
  - Reciprocal relationship between anxiety and substance use problems
- SUDs before ADs: Self-medication hypothesis  
- Boys before ADs: ADs from SUD-induced problems
- Measurement of diagnostic status versus first symptoms/lifetime drug use  
- Retrospective recall of disorder onset among adult populations
- Aggregated ADs versus SUDs

Purpose of this study is to determine:  
- Associations between types of ADs comorbid with SUDs  
- Order of onset of comorbid ADs and SUDs  
- Mean age of secondary disorder onset

Subjects

- Eligibility criteria: ages 14–18, medically detoxed (if required), no major health conditions requiring hospitalization due to current suicidal/harmful behavior, current DSM-IV diagnosis of SUD  
- Approved by Case Medical Center Institutional Review Board  
- NIAAA certificate of confidentiality obtained  
- $25 compensation for completed interviews

**METHOD**

- Eligibility criteria: ages 14–18, medically detoxed (if required), no major health conditions requiring hospitalization due to current suicidal/harmful behavior, current DSM-IV diagnosis of SUD

**RESULTS**

Sample Profile (Table 1):  
- Boys (N = 93)  
  - 67 (72%)  
  - 75\%*  
  - 14.3  
  - 88 (86%)  
  - 16.1

Table 1. Sample profile

<table>
<thead>
<tr>
<th>Youth Variables</th>
<th>Total (N = 195)</th>
<th>Boys (N = 93)</th>
<th>Girls (N = 102)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (M,SD)</td>
<td>16.1 (1.07)</td>
<td>16.13 (1.08)</td>
<td>16.23 (1.07)</td>
</tr>
<tr>
<td>Minority</td>
<td>39 (20%)</td>
<td>15 (16%)</td>
<td>24 (23%)</td>
</tr>
<tr>
<td>Sex</td>
<td>Male</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Age of first drink</td>
<td>11.3</td>
<td>11.2</td>
<td>11.4</td>
</tr>
<tr>
<td>Age of first panic</td>
<td>15.5</td>
<td>15.6</td>
<td>15.4</td>
</tr>
<tr>
<td>Social phobia</td>
<td>118 (61%)</td>
<td>118 (61%)</td>
<td>100 (98%)</td>
</tr>
<tr>
<td>Panic disorder</td>
<td>193 (99%)</td>
<td>193 (99%)</td>
<td>100 (98%)</td>
</tr>
<tr>
<td>Agoraphobia</td>
<td>179 (92%)</td>
<td>179 (92%)</td>
<td>100 (98%)</td>
</tr>
<tr>
<td>Marijuana</td>
<td>93 (100%)</td>
<td>93 (100%)</td>
<td>100 (98%)</td>
</tr>
</tbody>
</table>

Table 2. Associations of comorbid ADs and SUDs among adolescents

**DISCUSSION**

Onset ordering varied by disorder
- AD was equally likely to proceed or follow SUD  
- No clear relationship between agoraphobia and SUDs  
- Higher lifetime rates than other studies might alter relationship

Clinical implications:
- Interventions that focus on strategies to reduce social anxiety could prevent adolescent marijuana use

REFERENCES CITED


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**CONFLICT OF INTEREST STATEMENT**

The authors have no relevant financial relationships to disclose. They did not receive any compensations in the context and course of this original research presentation.