**Common Terminology and Definitions in Substance Abuse**

**Addiction**: A chronic, relapsing disease characterized by compulsive drug seeking and use, despite serious adverse consequences, and by long-lasting changes in the brain.

**Barbiturate**: A type of CNS depressant prescribed to promote sleep (usually in surgical procedures) or as an anticonvulsant.

**Benzodiazepine**: A type of CNS depressant prescribed to relieve anxiety and sleep problems. Valium and Xanax are among the most widely prescribed medications.

**Buprenorphine**: A mixed opiate agonist/antagonist medication approved by the FDA in October 2002 for the treatment of opioid addiction (e.g., heroin). Also known as Suboxone.

**Central Nervous System (CNS)**: The brain and spinal cord.

**CNS Depressants**: A class of drugs that slow CNS function (also called sedatives and tranquilizers), some of which are used to treat anxiety and sleep disorders; includes barbiturates and benzodiazepines.

**Comorbidity/Co-occurring Disorders (COD)/Dual Diagnosis**: The occurrence of two disorders or illnesses in the same person, also referred to as co-occurring conditions or dual diagnosis. Patients with comorbid illnesses may experience a more severe illness course and require treatment for each or all conditions.

**Detoxification**: A process in which the body rids itself of a drug (or its metabolites). During this period, withdrawal symptoms can emerge that may require medical treatment. This is often the first step in drug abuse treatment.

**Methadone**: A long-acting synthetic opioid medication that is used in treating opioid addiction and pain.

**Opioid**: A compound or drug that binds to receptors in the brain involved in the control of pain and other functions (e.g., morphine, heroin, hydrocodone, oxycodone).

**Physical Dependence**: An adaptive physiological state that occurs with regular drug use and results in a withdrawal syndrome when drug use is stopped; often occurs with tolerance. Physical dependence can happen with chronic—even appropriate—use of many medications, and by itself does not constitute addiction.

**Polysubstance abuse**: The abuse of two or more drugs at the same time, such as CNS depressants and alcohol.

**Prescription Drug Abuse**: The use of a medication without a prescription; in a way other than as prescribed; or for the experience or feeling elicited. Also known as "nonmedical" use.

**Sedatives**: Drugs that suppress anxiety and promote sleep; this includes benzodiazepines, barbiturates, and other types of CNS depressants.

**Stimulants**: A class of drugs that enhances the activity of monoamines (such as dopamine) in the brain, increasing arousal, heart rate, blood pressure, and respiration, and decreasing appetite; includes some
medications used to treat attention-deficit hyperactivity disorder (e.g., methylphenidate and amphetamines), as well as cocaine and methamphetamine.

**Tolerance:** A condition in which higher doses of a drug are required to produce the same effect achieved during initial use; often associated with physical dependence.

**Tranquilizers:** Drugs prescribed to promote sleep or reduce anxiety; includes benzodiazepines, barbiturates, and other types of CNS depressants.

**Withdrawal:** Symptoms that occur after chronic use of a drug is reduced abruptly or stopped.

**Frequently Used Acronyms**

Health and Human Services (HHS)

Substance Abuse and Mental Health Services Administration (SAMHSA)

Department of Public Health (DPH)

Bureau of Substance Abuse Services (BSAS)

Massachusetts Technical Assistance Partnership for Prevention (MassTAPP)