# 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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### **INTRODUCTION**

Craving is defined as an intense, persistent, and involuntary desire to use the substance /addictive behavior. Craving is a key phenomenon in addiction, due to its central role in relapse, common to all addictions, and thus considered as a prime target for addiction treatment.

Ecological Momentary Assessment (EMA) studies previously demonstrated a prospective association between increase in craving intensity, and higher probability of substance use in the following hours among participants beginning outpatient addiction treatment (Fatseas et al., 2015, Serre et al., 2025).

Yet, fewer than 20% of people who meet diagnostic criteria for a substance use disorder are currently engaged in treatment, reflecting a significant treatment gap (Park-Lee et al. 2017).

Can previous findings be generalized to individuals not currently engaged in treatment?

Could craving, and its predictive value on substance use, be an artefact of the treatment context, driven by patients' attempts to quit or clinicians' work to help the patient to identify craving to act on it?

### **OBJECTIVE**

Examine if the treatment context influenced the prospective association between craving and substance use in daily life.

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# **METHODS**

# **Population**



EMA protocol

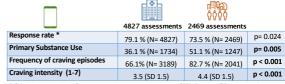


**Harm Reduction Settings** Regular users not in treatment "Active Users"

# Inclusion criteria

- → to identify one primary
- → DSM-5 diagnosis for substance use disorder
- → for Active Users: not the primary substance

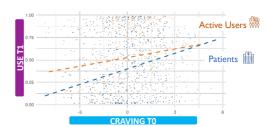
### FMA data



\* Calculated among the 169 participants who completed more than 35% of surveys (20 assessments)



Craving-Use association \* Population



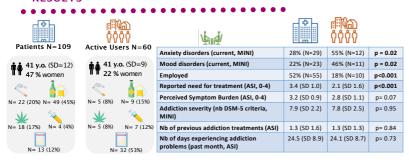
Multi-level model predicting primary substance use at T1				
Fixed effects	Estimate	Std Error	z value	Pr(> z )
(Intercept)	-4.51795	0.40834	-11.064	< 0.001 ***
Craving T0 (centered)	0.25795	0.05113	5.045	< 0.001 ***
Population (Active Users vs Patients)	-0.03734	0.29134	-0.128	0.898
Use T0	1.44753	0.20228	7.156	< 0.001 ***
Craving_individual mean	0.96499	0.10599	9.104	< 0.001 ***
Craving T0 * Population	-0.12665	0.08147	-1.555	0.120

#### Inclusion / or Day 1 Day 14 Treatment intake (CRAVING) USF ASI: Addiction Severity Index (Denis, et al. FMA MINI: Mini International Neuropsychiatric MINI 4 / day Interview (Sheehan, et al. 1998) EMA: (see Serre et al. 2012; 2018; 2025) Random Beep call

# Statistical Analyses

Multilevel mixed models examined the influence of treatment context ("Active users" versus "Patients") on the prospective link between craving intensity (T0) and primary substance use (T1).

# **RESULTS**



## DISCUSSION

### Main Results

Craving is frequent and intense in active users

→ Not simply an artefact of treatment / quit attempt

Craving remained a significant predictor of use, regardless of treatment status

- → Better understanding of the determinants of substance use in active users
- → Important information about users of Harm reduction settings, a population that remains under-studied, despite high addiction severity

# Limits

- → Not representative of all non-treatment-seeking individuals
- → Recruitment challenges in Harm Reduction settings
  - → but feasible

### **Perspectives**

"Active users" versus "Patients": Same severity, same treatment histories, but lower perceived need for

→ What drives treatment-seeking at a specific moment?















