



**ICASA office report August 2012 – September 2013**

**For the ICASA Foundation Board meeting on 23<sup>rd</sup> October 2013, Barcelona, Spain**

Geurt van de Glind  
ICASA Foundation director  
Utrecht, 16th October 2013

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This report refers to the ICASA Foundation Strategic Plan 2012 – 2015. The plans and actions are placed in text boxes. Below each text box I will mention the actions/decisions and new questions, whenever appropriate.

**1. Scientific work**

*1.1 IASP study:* Data sampling completed. An extra IASP meeting + writing session was organized, with extra funding by the Waterloo foundation. Data cleaning process was finished, after a 2<sup>nd</sup> data entry of the CAADID part II data. Currently the 5 main papers (Methods/ Prevalence/ ASRS characteristics/ Comorbidity/Severity of SUD) are being prepared for submission.

**Actions:**

Submission of 5 main publications: before December 2012. 4 Remaining publication (methods paper has been submitted) will be discussed during the Bordeaux annual meeting.

**Comment 16<sup>th</sup> October 2013**

4 IASP papers have been published or accepted for publication. The 5<sup>th</sup> publication on severity of SUD turned out to be impossible, due to missing data on SUD severity variables.

In the board meeting: defining a list of additional publications, for which writing groups/ initiator will be appointed in the Bordeaux annual meeting.

**Comment 16<sup>th</sup> October 2013**

Several papers are in different stages of development:

**Clinical characteristics of treatment seeking substance use disorder patients with and without adult DSM-5 ADHD: the role of antisocial personality disorder**

Initiator: Geurt van de Glind: draft to be discussed at the network meeting of 26<sup>th</sup> October.

**Risk factors, education and ADHD history**

Initiator: Arvid Skutle – main results of analyses will be presented at the network meeting of 26<sup>th</sup> October.

### **Trauma in treatment seeking SUD patients with and without ADHD**

Initiator: Maija Konstenius – first draft to be discussed at the network meeting of 26<sup>th</sup> October.

### **Validity of the MINI-plus ADHD module in treatment seeking SUD patients**

Initiators: Toni Ramos-Quiroga/ Sharlene Kaye – first results of analyses to be discussed at the network meeting of 26<sup>th</sup> October.

### **Persistence of ADHD symptoms into adulthood**

Initiators: Toni Ramos-Quiroga/ Sharlene Kaye – needs to be started up.

#### *1.2 IASP-2 study:*

Training was performed in Porto Alegre (Brazil), Alexandria (Egypt) and Waterford (Ireland). Data sampling started in Ireland. South Africa will follow within a month. Brazil's start was delayed because of illness of Claudia Szobot. Situation in Egypt is uncertain.

A Database was created via the University of Amsterdam, with new instruments added (K-SADS for ODD/CD/nicotine, and Fagestrom also for nicotine).

### **Comment 16<sup>th</sup> October 2013**

During the annual network meeting in Bordeaux 2012, the network decided to give priority to other research projects. Meanwhile the Noaber Foundation issued another € 1500 funding for travel expenses. Due to a variety of reasons, the IASP 2 study suffers from delay. The database that is built for the IASP 2 study is used for data sampling of the CASP study.

Brazil and South Africa are planning to start data collection in 2014.

#### *1.3 CASP study (MOXO test, neurotech)*

The study slowly started. Now Hungary and the USA are back on track. In Australia there is delay due to financial restraints.

We have now set up a system of weekly updates on the data sampling process.

Targeted finish of the data sampling process: 31<sup>st</sup> December 2012.

#### **Actions:**

Continuous data sampling monitoring;

Analyzing and writing publication: January – June 2013.

Discussion of data sampling and publication plan: in the Bordeaux meeting, in the CASP working group.

### **Comment 16<sup>th</sup> October 2013**

The CASP study had difficulties in the data sampling process. USA completed the data sampling. In each 3 groups (controls/ SUD only/ SUD + ADHD) they have 60 persons. Australia has agreed on sampling less SUD only and SUD + ADHD subjects: 30 in each group. In addition they now have 50 controls. Hungary has 30 subjects in the SUD + ADHD group, and 60 in the two other groups. Resulting in overall sample size of: 150 controls, 120 SUD only, 120 SUD + ADHD.

Analyses are currently run. I visited Neurotech to discuss the data. Sharlene Kaye will present the preliminary results at the Barcelona conference. And we will discuss writing the paper at the network meeting of 26<sup>th</sup> October.

#### *1.5 Development of new research protocols + funding these projects.*

#### **Actions:**

Development of the research protocol for the PACRISK study. Draft will be discussed (attached to this strategic plan).

Development of the research protocol for the longitudinal study based on the IASP.

**Comment 16<sup>th</sup> October 2013**

During the annual meeting in Bordeaux, 2012 it was decided to put development of the PACRISK study on hold.

Recently we are working on a new research protocol, that might be suitable for the funding scheme of the EU funding program EUREKA. These plans will be discussed in a separate meeting on 25<sup>th</sup> October. Please find another note on this issue for further discussion at the ICASA board meeting.

*1.6 Research position at the University of Amsterdam*

With financial support from the Waterloo Foundation, we created a research position at the University of Amsterdam. We called this the 'spider in the web' related to ICASA research. The scientific ICASA work can be coordinated via this position. The funding lasts until 31<sup>st</sup> August 2013, for 2 days per week.

**Actions:**

The ICASA Foundation board needs to decide on continuation of this position after 31<sup>st</sup> August 2013, and on funding this position.

**Comment 16<sup>th</sup> October 2013**

With the current available funding this position has been continued until the end of 2013. In this board meeting, the board needs to discuss the future of this position.

*2.1 Bookkeeping*

We have terminated the contract with the bookkeeping company, and now directly use the YUKI bookkeeping tool. The YUKI company assists in making up the annual financial reports.

*2.2 Insurance of the board members*

The board members are currently insured via the Trimbos-institute insurance. The financial reports on 2010 and 2011 were necessary for an independent insurance. This is now under consideration of the insurance company.

**Comment 16<sup>th</sup> October 2013**

Bookkeeping: See the Financial reports on 2012 and the budget for 2013/2014.

Insurance: also for 2012, the Trimbos-instituut took care of insurance of the board members. After signing the financial reports on 2012 and agreement on the plans for 2013 and 2014, I will contact the insurance company on an independent insurance for the ICASA board members.

*2.3 Financial situation for the ICASA office*

(...)

We therefore made new plans, with a decreased level of time available for the ICASA director: 0.1 (4 hours per week).

**Actions:**

The budget for 2012 and for 2013 needs approval by the board.

**Actions:**

Develop a structure of membership/ membership fee for very active partners, active partners and not-working partners.

**Comment 16<sup>th</sup> October 2013**

The management agreement for 2013 has been signed. For 2014 new decisions need to be made. See also the document 'Financial situation ICASA Foundation 2013/2014'.

It was decided that participants fee is not mandatory. After the meeting several network participants contributed for 2013 (See the document 'Financial situation ICASA Foundation 2013/2014').