

Literaturverzeichnis

Hamburger Ärzteblatt 02 | 2018

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S. 12-16: Mit Kurzberatungen Rauchstopp umsetzen.

Von Dr. rer. nat. Sabrina Kastaun, Dipl.-Psych., Dipl.-Soz. Geront. Verena Leve, M.A., Dr. PH Melanie Böckmann, M.A., Olaf Reddemann, Univ.-Prof. Dr. Daniel Kotz, MPH

1. World Health Organization (WHO). WHO report on the global tobacco epidemic. Warning about the dangers of tobacco. 2011, WHO: Geneva.
2. Mons U. Tobacco-Attributable Mortality in Germany and in the German Federal States – Calculations with Data from a Microcensus and Mortality Statistics. [Tabakattributable Mortalität in Deutschland und in den deutschen Bundesländern – Berechnungen mit Daten des Mikrozensus und der Todesursachenstatistik]. Gesundheitswesen, 2011. 73(04): 238-246.
3. <http://www.smokinginengland.info> [Zugriff 05.11.2017].
4. <http://www.debra-study.info> [Zugriff 05.11.2017].
5. Jha P, Ramasundarahettige C, Landsman V, Rostron B, Thun M, Anderson RN, et al. 21st-Century Hazards of Smoking and Benefits of Cessation in the United States. *New Engl J Med*, 2013. 368(4): 341-350.
6. Doll R, Peto R, Boreham J, Sutherland I. Mortality in relation to smoking: 50 years' observations on male British doctors. *BMJ*, 2004. 328(7455): 1519.
7. Breitling LP, Rothenbacher D, Vossen CY, Hahmann H, Wüsten B, Brenner H. Validated smoking cessation and prognosis in patients with stable coronary heart disease. *J Am Coll Cardiol*, 2011. 58(2): 196-197.
8. Fagerström K. Determinants of tobacco use and renaming the FTND to the fagerström test for cigarette dependence. *Nicotine Tob Res*, 2012. 14(1): 75-78.
9. Belluzzi JD, Wang R, Leslie FM. Acetaldehyde Enhances Acquisition of Nicotine Self-Administration in Adolescent Rats. *Neuropsychopharmacology*, 2004. 30(4): 705-712.
10. Donny EC, Dierker LC. The absence of DSM-IV nicotine dependence in moderate-to-heavy daily smokers. *Drug Alcohol Depend*, 2007. 89(1): 93-6.
11. Hughes JR, Keely J, Naud S. Shape of the relapse curve and long-term abstinence among untreated smokers. *Addiction*, 2004. 99(1): 29-38.
12. Cahill K, Lindson-Hawley N, Thomas KH, Fanshawe TR, Lancaster T. Nicotine receptor partial agonists for smoking cessation. *Cochrane Database Syst Rev*, 2016(5): CD006103.
13. Stead LF, Buitrago D, Preciado N, Sanchez G, Hartmann-Boyce J, Lancaster T. Physician advice for smoking cessation. *Cochrane Database Syst Rev*, 2013(5): Cd000165.
14. Stead LF, Koilpillai P, Fanshawe TR, Lancaster T. Combined pharmacotherapy and behavioural interventions for smoking cessation. *Cochrane Database Syst Rev*, 2016. 3: CD008286.
15. Batra A, Mann K. S3-Leitlinie "Screening, Diagnostik und Behandlung des schädlichen und abhängigen Tabakkonsums". AWMF-Register Nr. 076-006. 2015, Arbeitsgemeinschaft der Wissenschaftlichen Medizinischen Fachgesellschaften (AWMF). <http://www.awmf.org/leitlinien/detail/II/076-006.html> (letzter Zugriff am 05.11.2017)
16. Kotz D, Willemsen M, Brown J, West R. Light smokers are less likely to receive advice to quit from their GP than moderate-to-heavy smokers: a comparison of national survey data from the netherlands and england. *Eur J Gen Pract*, 2013. 19(2): 99-105.
17. Twardella D, Brenner H. Lack of training as a central barrier to the promotion of smoking cessation: a survey among general practitioners in germany. *Eur J Public Health*, 2005. 15(2): 140-5.

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18. Hoch E, Franke A, Sonntag H, Jahn B, Mühlig S, Wittchen HU. Raucherentwöhnung in der primärärztlichen Versorgung – Chance oder Fiktion? Ergebnisse der "Smoking and Nicotine Dependence Awareness and Screening (SNICAS)"-Studie. Suchtmedizin, 2004. 6(1): 47-51.
19. Aveyard P, Begh R, Parsons A, West R. Brief opportunistic smoking cessation interventions: a systematic review and meta-analysis to compare advice to quit and offer of assistance. Addiction, 2012. 107(6): 1066-73.
20. Kotz D, Brown J, West R. Predictive validity of the motivation to stop scale (MTSS): a single-item measure of motivation to stop smoking. Drug Alcohol Depend, 2013. 128(1-2): 15-9.
21. West R, Sohal T. "Catastrophic" pathways to smoking cessation: findings from national survey. BMJ, 2006. 332(7539): 458-60.
22. Fiore MC, Jaen CR, Baker TB, Bailey WC, Bennett G, Benowitz NL, et al. A clinical practice guideline for treating tobacco use and dependence: 2008 update - A US public health service report. 2008. 35(2): 158-176.
23. McRobbie H, Bullen C, Glover M, Whittaker R, Wallace-Bell M, Fraser T, et al. New Zealand smoking cessation guidelines. N Z Med J, 2008. 121(1276): 57-70.
24. Fidler JA, Shahab L, West R. Strength of urges to smoke as a measure of severity of cigarette dependence: comparison with the Fagerstrom Test for Nicotine Dependence and its components. Addiction, 2011. 106(3): 631-8.
25. Balfour DJ, Fagerstrom KO. Pharmacology of nicotine and its therapeutic use in smoking cessation and neurodegenerative disorders. Pharmac Ther, 1996. 72(1): 51-81.
26. Cheong Y, Yong HH, Borland R. Does how you quit affect success? A comparison between abrupt and gradual methods using data from the international tobacco control policy evaluation study. Nicotine Tob Res, 2007. 9(8): 801-10.

S. 22-24: „Wir brauchen eine verbindliche Aufwandsentschädigung fürs PJ“. *Von Luke Hopf, Silja Steinmann*

1. 12. Studierendensurvey der AG Hochschulforschung 2012/13 (<https://www.soziologie.uni-konstanz.de/ag-hochschul-forschung/publikationen/studierendensurvey/hauptberichte/>)
2. Deutsches Ärzteblatt; Jg. 113; Heft 38; 23. September 2016
3. ÄApprO 2002, §3 Absatz 4
4. <http://www.spiegel.de/lebenundlernen/uni/medizinstudenten-im-pj-das-haette-auch-schiefgehen-koennen-a-914791.html>
5. <https://www.bmfsfj.de/bmfsfj/aktuelles/presse/pressemitteilungen/klare-regeln-zum-schutz-von-mutter-und-kind/102986#>

S. 28-30: Cannabisarzneimittel – was Mediziner wissen müssen. *Von Dr. Maja Falckenberg*

1. Hoch E, Schneider M, et al. Cannabis: Potential und Risiken. Eine wissenschaftliche Analyse (CaPRis). 2015-2017, Klinik für Psychiatrie und Psychotherapie, LMU München. Gefördert vom Institut Bundesministerium für Gesundheit. <http://www.bundesgesundheitsministerium.de/CaPRis>
2. Grotenhermen F, Müller-Vahl K. Das therapeutische Potenzial von Cannabis und Cannabinoiden. Dtsch Arztebl Int 2012; 109(29-30):495-501

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3. Hagmann SG. Wissenschaftliche Daten fehlen. Dtsch Arztebl Int 2013;110(10):174
4. Whiting PF, Wolff RF, Deshpande S, Di Nisio M, Duffy S, Hernandez A. Cannabinoids for Medical Use; A Systematic Review and Meta-analysis JAMA. 2015;313(24):2456-2473.
5. Häuser W, Fitzcharles MA, Radbruch L, Petzke F. Cannabinoide in der Schmerz- und Palliativmedizin Eine Übersicht systematischer Reviews und prospektiver Beobachtungsstudien. Deutsches Ärzteblatt 2017, Sept; Heft 38; 114:627–34.
6. Devinsky O Cannabidiol in patients with treatment-resistant epilepsy: an open-label interventional trial. Lancet Neurol. 2016 Mar;15(3):270-8.
7. Moulin D, Boulanger A, Clark AJ, et al. Pharmacological management of chronic neuropathic pain: revised consensus statement from the Canadian Pain Society. Pain Res Manag 2014;19:328–35.
8. Fitzcharles MA, Ste-Marie PA, Goldenberg DL, et al. 2012 Canadian guidelines for the diagnosis and management of fibromyalgia syndrome: executive summary. Pain Res Manag 2013;18:119–26.
9. Koppel BS, Brust JC, Fife T, et al. Systematic review: efficacy and safety of medical marijuana in selected neurologic disorders: report of the Guideline Development Subcommittee of the American Academy of Neurology. Neurology 2014;82:556–63. (x).
10. Häuser W, Fitzcharles MA, Radbruch L, Petzke F. Cannabinoide in der Schmerz- und Palliativmedizin. Eine Übersicht systematischer Reviews und prospektiver Beobachtungsstudien. Deutsches Ärzteblatt 2017, Sept; Heft 38; 114:627–34.
11. Hill KP. Medical marijuana for treatment of chronic pain and other medical and psychiatric problems: A clinical review. JAMA 2015;313:2474–83.

S. 32-33: Medikamenteninteraktion führt zu Transplantatnierenversagen. *Von Dr. Maida Mahmud, Prof. Dr. Ulrich Wenzel*

1. Murray BM, Paller MS, Ferris TF. Effect of cyclosporine administration on renal hemodynamics in conscious rats. Kidney Int 1985;28:767–774.
2. Naesens M, Kuypers DR, Sarwal M. Calcineurin inhibitor nephrotoxicity. Clin J Am Soc Nephrol 2009;4:481-508.
3. Randhawa PS, Shapiro R, Jordan ML, et al. The histopathological changes associated with allograft rejection and drug toxicity in renal transplant patients maintained on FK506. Clinical significance and comparison with cyclosporine. Am J Surg Pathol 1993;17:60-8.

Allgemein: <https://en.wikipedia.org/wiki/CYP3A4>