Supplementary Material/Online Table 1. Professional meetings where the DSM-5 Substance Use Disorder Workgroup presented changes under consideration

Venue	Location	Date
NIDA Clinical Trials Network Steering Committee	Bethesda, MD	September, 2007
Columbia University, Dept. of Psychiatry Grand Rounds	New York, NY	January, 2009
Yale University, Dept. of Psychiatry Grand Rounds	New Haven, CT	February, 2009
Alcohol Research Group	Oakland, CA	March, 2009
American Psychiatric Association	San Francisco, CA	May, 2009
College on Problems of Drug Dependence	Reno, NV	June, 2009
Research Society on Alcoholism	San Diego, CA	June, 2009
American Psychological Association	Toronto, Canada	August, 2009
National Defense Medical Center	Taipei, Taiwan	September, 2009
Peking University	Beijing, China	September, 2009
Washington Univ., Dept. of Psychiatry Research Seminar	St. Louis, MO	October, 2009
SUNY Downstate, Henri Begleiter Memorial Grand Rounds	Brooklyn, NY	March, 2010
American Psychiatric Association	New Orleans, LA	May, 2010
Research Society on Alcoholism	San Antonio, TX	June, 2010
College on Problems of Drug Dependence	Phoenix, AZ	June, 2010
American Psychological Association	San Diego, CA	August, 2010
NIDA Genetics Consortium	Bethesda, MD	November, 2010
Winter Conference on Brain Research	Keystone, CO	January, 2011
University of Connecticut Psychiatry Grand Rounds	Farmington, CT	February, 2011
NIDA Clinical Trials Network Steering Committee	Bethesda, MD	March, 2011
Meeting of Social Sciences	Bordeaux, France	March 18, 2011
American Society of Addiction Medicine	Washington, DC	April, 2011
American Psychological Association	Washington, DC	August, 2011
International Society of Addiction Medicine	Oslo, Norway	September, 2011
European Society for Biomedical Research on Alcoholism	Vienna, Austria	September, 2011
APA Institute on Psychiatric Services	San Francisco, CA	October, 2011
International Congress on Dual Disorders	Barcelona, Spain	October, 2011
American Public Health Association	Washington, DC	October, 2011
University of Pennsylvania, Grand Rounds Seminar	Philadelphia, PA	October , 2011
Yale University, Dept. of Psychiatry Grand Rounds	New Haven, CT	October, 2011
American Academy of Addiction Psychiatry	Scottsdale, AZ	December, 2011
Georgia State University Center for the Economic Analysis of Risk	Atlanta, GA	April, 2012
Columbia University Drugs and Society Seminar Series	New York, NY	April, 2012

Online Table 2. Proposed DSM-5 substance use disorder criteria: factor and Item Response Theory results using criteria required to persist across three years of follow-up, N=34,653[a]

			Criterion response model parameters	
CRITERION	Prevalence (%)	Factor Loadings	Severity (s.e.)	Discrimination (s.e.)
DSM-IV dependence				
Tolerance	3.8	.74	2.29 (.040)	2.19 (.068)
Withdrawal	4.0	.84	2.05 (.030)	2.99 (.098)
Larger/longer	7.0	.87	1.69 (.020)	3.35 (.107)
Quit/control	5.6	.76	2.03 (.033)	2.26 (.064)
Time spent	1.4	.89	2.39 (.037)	4.10 (.200)
Activities given up	0.5	.93	2.70 (.054)	4.96 (.388)
Physical/psychological problems	2.8	.91	2.08 (.026)	4.29 (.218)
DSM-IV abuse				
Hazardous use	6.1	.77	1.94 (.036)	2.38 (.076)
Social/interpersonal problems	1.2	.92	2.40 (.035)	4.69 (.293)
Neglected major roles	0.5	.93	2.65 (.042)	5.21 (.364
Craving	2.2	.83	2.34 (.035)	3.02 (.120)

[a] Data source: National Epidemiologic Survey on Alcohol and Related Conditions, Wave 2 (2004-2005) conducted by the National Institute on Alcohol Abuse and Alcoholism[6], whose participants were non-institutionalized civilians aged 18 and older at their Wave 1 interview in 2001-2002 (*N*=34,653). Sample included current drinkers at Wave 1 (2001-2001) who participated in Wave 2. As reported in detail elsewhere[6], the NESARC had a multistage design and oversampled Blacks, Hispanics and young adults. Analyses incorporated sample weights to adjust for the complex sample design and non-response.

Mplus version 6.12 (211) was used for the analyses. Specifically in the IRT analyses, a 2 parameter logistic Item Response model (2-PL IRM) was used, allowing both discrimination and severity parameters to be estimated for each item (criterion). IRT contains two somewhat interrelated assumptions, one, that the underlying latent construct which the items measure is unidimensional, and secondly, that all the item indicators are locally independent. Local independence is assumed present if unidimensionality is established. To ensure unidimensionality, confirmatory factor analysis (CFA) was conducted using the weighted least squares means and variance adjusted (WLSMV) estimator, best suited in the presence of binary indicators (0=not endorsed, 1=endorsed).