OBJECTIVES
To establish the developmental sequence of Axis I disorders in relation to age of first use of the substance dependency disorder (SDD) that youth present with at admission to residential chemical dependency (CD) treatment.

METHODS
Current and past DSM-IV diagnoses were determined based on the results of the interviewer-administered Mini International Neuropsychiatric Interview (MINI; 6). Diagnoses were confirmed by a medical chart review of clinical evaluations by medical staff. Legal problems were assessed from the Treatment Services Review and court records. Descriptive and inferential statistics were used to determine the sequence ordering of SDD in relation to earliest age of Axis I disorder onset.

RESULTS
• The majority of the sample met DSM-IV criteria for at least one SDD. As shown in Table 1, the most common drug of SDD was Cannabis (33%), followed by Hallucinogen (32%), Cocaine (19%), Stimulant (19%), Opioid (19%), Sedatives (12%), and Inhalants (4%). Approximately half of the sample also met DSM-IV criteria for Alcohol Dependence (56%). Approximately one-third of the sample (33%) reported their first use before age 13.
• As shown in Table 2, demographic variables did not distinguish youth who did and did not begin using before age 13. As shown in Table 3, youth who began experimenting with the drug of the presenting SDD before the age of 13 were more likely to be admitted into treatment with the following co-morbid disorders: ADD, PTSD, and PD. A reverse pattern was found for Bulimia. As shown in Figure 1, no clear pattern was found for Conduct Disorder or Major Depressive Disorder.
• As shown in Table 3, youth whose age of first use was prior to age 13 started CD treatment with significantly more Axis I disorders and legal problems. These youth were more likely to have been in jail, with a trend toward more burglary, arrests, and charges.

CONCLUSIONS
• The findings lend support to the notion that preadolescence is a pivotal period during which psychiatric disorders and early initiation of substance use are robust predictors of future legal problems and the development of SDD.
• Most psychiatric disorders were not predictive of a substance use disorder in teens whose substance use started after age 13. This suggests that the causes underlying substance abuse for this group may be more transitory and developmentally related thus requiring a different treatment approach.
• These findings have direct implications in the assessment, prevention and treatment of SDDs in youth. These results imply that frequent screening is needed for the emergence of specific developmental risk markers of SDD, such as ADHD and PTSD.
• These findings speak to the need for ongoing treatment of these disorders to mitigate against the early onset of substance use and subsequent development of SDD.

CLINICAL APPLICATIONS
• These findings have direct implications in the assessment, prevention and treatment of SDDs in youths. These results imply that frequent screening is needed for the emergence of specific developmental risk markers of SDD, such as ADHD and PTSD.
• Findings suggest the need for interventions designed to delay age of first use of illegal substances.
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Acknowledgements: This research was supported by a K01 AA015137-03 from the National Institute on Alcohol Abuse and Alcoholism to Dr. Pagano. Poster preparation was supported by the Division of Child Psychiatry, Department of Psychiatry, Case Western Reserve University, Cleveland, OH. The data collected in this study were made available to the authors by the generous support of New Directions, an adolescent chemical dependency treatment facility in Beachwood, OH. The authors have no conflicts or appearance thereof to disclose.