

1 **Alcohol Cues Elicit Different Abnormalities in Brain**
2 **Networks of Abstinent Men and Women**
3 **with Alcohol Use Disorders**

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25 **Keywords:** Alcoholism; reward; fMRI; gender; memory; emotion

26 **Running Title:** Gender, brain responses, and alcohol

27 **Highlights:** Brain reward regions activate highly when individuals with a history of alcohol use
28 disorders view alcoholic beverages.

29 The brain regions identified subserve vision, memory, and judgement.

30 Opposite abnormalities in activation patterns appeared for alcoholic men and women.
31

32

33 **Abstract**

34 We employed fMRI in 84 men and women with and without a history of alcohol use disorders
35 (ALC and NC, respectively), to explore how gender interacts with alcoholism as reflected in
36 brain activity elicited by alcohol cues. Brain activation was measured in a working memory task
37 (delayed matching-to-sample) with emotional faces as the sample and match cues. During the
38 delay period, intervening distractors were either reward-salient cues (alcoholic beverages) or
39 neutral cues (nonalcoholic beverages or scrambled pictures). ALC women (ALCw) had higher
40 accuracy than ALC men (ALCm). Analyses of scans during the viewing of distractor images
41 revealed significant group-by-gender interactions. Compared to NC men, ALCm evidenced
42 lower activation contrast between reward-salient cues and neutral cues in *default mode network*
43 regions (including superior prefrontal and precuneus areas), while ALCw had more activation
44 than NC women. Similar interactions were observed for *task-regions* (including superior parietal,
45 lateral occipital, and prefrontal areas). Region of interest analyses showed that the ALC group
46 had significantly higher levels of activation throughout reward-related circuitry during alcohol
47 distractor interference than during scrambled picture interference. These results suggest that
48 abstinent ALCm and ALCw differ in processing reward-salient cues, which can impact treatment
49 and recovery.

50

51 **1. Introduction**

52 Alcohol use disorders (AUD) have been associated with deficits in cognitive and
53 emotional functions (Oscar-Berman *et al.*, 2014). Because of their reward salience, alcohol cues
54 such as pictures of alcoholic beverages elicit attentional bias and brain activation in individuals
55 with AUD (Carter & Tiffany, 1999; Goldstein & Volkow, 2002; Schacht *et al.*, 2013). Alcohol
56 cues induce a hyperattentive state with attention drawn to the rewarding stimuli (Townshend &
57 Duka, 2001; Franken, 2003; Field & Cox, 2008; Vollstädt-Klein *et al.*, 2011). Therefore, the
58 cues selectively interfere with other cognitive abilities such as memory. Importantly, attentional
59 bias toward alcohol-related stimuli also has been associated with level of craving, consumption,
60 dependence, and physiological arousal (Sharma *et al.*, 2001; Ryan, 2002; Field *et al.*, 2004; Field
61 & Eastwood, 2005; Bordnick *et al.*, 2008; Sinha *et al.*, 2009; Wiers *et al.*, 2014; Sawyer *et al.*,
62 2015).

63 Functional magnetic resonance imaging (fMRI) studies of attentional biasing, and
64 specifically cue sensitivity, have often included either only men with and without a history of
65 AUD (ALC and NC groups), or groups of men and women with sample sizes too small to
66 examine gender effects (Fryer *et al.*, 2013; Schacht *et al.*, 2013). However, gender impacts the
67 ways in which alcohol affects the brain and behavior (Becker *et al.*, 2017; Sawyer *et al.*, 2017,
68 2018, 2019; Seitz *et al.*, 2017; Rivas-Grajales *et al.*, 2018; Hoffman *et al.*, 2019; Kaag *et al.*,
69 2019; Fama *et al.*, 2020; Verplaetse *et al.*, 2021), due to interactions with physiological and
70 social factors (Ruiz & Oscar-Berman, 2015; Mosher Ruiz *et al.*, 2017). In the present study, we
71 examined gender differences using a delayed matching-to-sample (DMTS) task (Dolcos &
72 McCarthy, 2006) with alcohol cues serving as distractor stimuli, in a cohort of ALC and NC men
73 and women (AUDm, AUDw, NCm, and NCw). The DMTS task requires an attention-demanding

74 kind of memory called “working memory.” In this study, the participants were required to
75 remember photographs of emotional faces while distracting pictures of alcoholic beverages,
76 nonalcoholic beverages, or scrambled images intervened during the delay period. We chose faces
77 as the sample stimuli for two primary reasons. First, in a previous study (Marinkovic *et al.*, 2009)
78 we found that men with AUD had abnormally low brain activity in temporal limbic regions when
79 viewing faces, and second, we used the same dataset that we had acquired for a prior report
80 (Oscar-Berman *et al.*, 2019) in which we described the brain’s responses to the initial to-be-
81 encoded emotional faces phase (the sample) of the DMTS task. For the present study, the data
82 derived from the delay and match portions of the task allowed us to test the attentional biasing
83 effect, wherein we expected alcohol cues, more than other cue types, to impair performance on
84 memory for face identity.

85 Functional MRI tasks activate multiple brain networks, and abnormalities in the default
86 mode network (DMN) have been implicated in AUD and in psychiatric disorders (Menon, 2011;
87 Zhang & Volkow, 2019). The DMN has been observed to be more active during story telling,
88 reading and memory tasks, imagining future scenarios, self-reference, rumination, and when the
89 mind wanders while staring at a fixation cross during fMRI scanning (Tops *et al.*, 2014; Beaty *et*
90 *al.*, 2016; Buckner & DiNicola, 2019). We refer to the DMN regions as *fixation-regions* because
91 they are more active during the idle delay intervals when the fixation stimulus is presented
92 between DMTS trials than during stimulus presentations. Vertex-wise analyses have revealed
93 that cortical fixation-regions include: (1) an “anterior hub,” consisting of portions of the rostral
94 anterior cingulate cortex (ACC), ventromedial prefrontal cortex, and medial superior frontal
95 cortex; (2) a “posterior hub,” which includes portions of the posterior cingulate and precuneus,
96 (3) the temporoparietal junction, which covers parts of the angular gyrus and inferior parietal

97 lobule; and (4) the superior and middle temporal gyrus region (Margulies *et al.*, 2016; Buckner
98 & DiNicola, 2019; Uddin *et al.*, 2019).

99 In addition to the DMN regions, we used vertex-wise analyses to examine *task-regions*,
100 which are more engaged during the DMTS task than while looking at unengaging fixation
101 crosses. Literature on distractor interference during working memory has suggested that task-
102 regions involve a distributed network including prefrontal cortex, along with dorsal and ventral
103 visual association cortex, which are necessary for attentional functioning (Loeber *et al.*, 2009)
104 and for inhibiting distracting visual stimuli (Jha *et al.*, 2004; Clapp *et al.*, 2010). Additional task-
105 regions involved in attention, working memory, and emotional processing, include the dorsal
106 ACC and lateral prefrontal areas. The dorsal ACC in particular has been implicated in craving
107 and attentional biasing (Goldstein & Volkow, 2011).

108 In advance of any analyses, we used prior literature to select ten *a priori* anatomically-
109 defined regions of interest (ROI) involved in alcohol cue exposure, distractor interference,
110 craving, reward processing and salience, or working memory for emotional faces. The first nine
111 ROI are the dorsolateral prefrontal cortex (DLPFC), ventrolateral prefrontal cortex (VLPFC),
112 orbitofrontal cortex (OFC), insular cortex, parahippocampal gyrus, hippocampus, amygdala,
113 fusiform, and ACC. Previous studies provide support for each of those nine *a priori* ROI (George
114 *et al.*, 2001; Wrase *et al.*, 2002; Tapert *et al.*, 2003; Myrick *et al.*, 2004; Heinz *et al.*, 2007; Ray
115 *et al.*, 2010; Goldstein & Volkow, 2011; Schacht *et al.*, 2013; Field *et al.*, 2014; Alba-Ferrara *et*
116 *al.*, 2016; Sawyer *et al.*, 2020). The tenth ROI is the “extended reward and oversight system”
117 (EROS) as described and named in our previous papers (Makris *et al.*, 2008; Sawyer *et al.*,
118 2017). The EROS ROI is a single large but discontinuous composite ROI that had been created
119 by combining 11 regions (seven of the ROI noted above, all but the VLPFC and fusiform), plus

120 an additional four: nucleus accumbens, ventral diencephalon, subcallosal cortex, and temporal
121 pole. For each of the ten ROI, we intended to confirm findings from each of the aforementioned
122 studies that had identified abnormal activation by alcohol cues in AUD, and additionally to
123 investigate differences between men and women. We expected lower brain activation in the ALC
124 group in regions involved in facial identity and inhibition of distractor interference, but higher in
125 regions responsible for reward salience.

126 In summary, we investigated brain activation for ten ROI, and for vertex-wise cortical
127 analyses of fixation-regions and task-regions. We examined the accuracy of the participants'
128 memory for the face identities after exposure to attentionally salient pictures to test our
129 hypothesis that alcohol cues would distract the ALC group more than the NC group. We
130 determined how brain regions were activated by the distractor contrasts, how the contrasts
131 differed for ALC and NC groups, and how those abnormalities varied by gender. We
132 hypothesized that attentional biasing would be evident for the ALC group in the form of stronger
133 brain activity contrasts (alcoholic beverage cues compared to nonalcoholic and scrambled
134 stimuli). Regarding gender differences, we made predictions based upon previous work in our
135 laboratory wherein we found that brain regions of ALCw (compared to NCw) were overactive in
136 response to highly charged emotional stimuli (Sawyer *et al.*, 2019). We hypothesized that the
137 ALCw would evidence hyperactivation to emotionally valent stimuli, whereas the activation
138 contrasts for ALCm would be weaker. We also expected to replicate prior results (Marinkovic *et*
139 *al.*, 2009; Sawyer *et al.*, 2019) showing lower responses in ALCm than NCm.

140

141

142 **2. Materials and Methods**

143 *2.1 Participants*

144 Participants in this study included 42 abstinent long-term ALC individuals (21 ALCw)
145 and 42 NC controls (21 NCw), with comparable age, education, and IQ (see Table 1 in the
146 Results). Participants were recruited through flyers placed in treatment and after-care facilities,
147 the Boston VA Healthcare System facility, Massachusetts General Hospital, the Boston
148 University School of Medicine, and in public places (*e.g.*, churches, stores), as well as through
149 newspaper and internet advertisements. This study was reviewed and approved by human studies
150 Institutional Review Boards at the affiliated institutions. All participants gave written informed
151 consent prior to participation, and they were compensated for their time.

152 Selection procedures included a telephone interview to determine age, education, health
153 and alcohol and drug use history, including prescription drugs. Participants were right-handed,
154 had normal or corrected-to-normal vision, and spoke English as their first language (or had
155 acquired English as a second language by age five). Current drug use excepting nicotine was
156 cause for exclusion, as were history of alcohol-related liver disease, epilepsy, head trauma
157 resulting in loss of consciousness for 15 minutes or more, HIV, schizophrenia, or metal implants.

158

159 *2.2 Neuropsychological Assessment*

160 Neuropsychological testing was conducted at the Department of Veterans Affairs (VA)
161 Boston Healthcare System facility prior to scanning. Participants completed a medical history
162 interview, vision test, handedness questionnaire (Briggs & Nebes, 1975), and a battery of tests as
163 described below. All subjects were screened using the Hamilton Rating Scale for Depression
164 (Hamilton, 1960) and the Diagnostic Interview Schedule for the DSM-IV (Robins *et al.*, 2000).

165 The majority of participants also were administered the Wechsler Adult Intelligence Scale
166 (WAIS-III) and the Wechsler Memory Scale (WMS-III) (Wechsler, 1997). Four participants
167 (two ALCw and two ALCm) received the WAIS-IV and WMS-IV (Holdnack & Drozdick,
168 2010), and WMS-III scores were not obtained from one ALCm. The scores for these participants
169 were adjusted to account for differences in scoring outcomes relative to the earlier versions of
170 the scales. Because craving for the rewarding effects of alcohol is known to serve as a trigger for
171 relapse in those recovering from AUD (Schneider *et al.*, 2001), and alcohol cue exposure in
172 particular is known to be related to relapse (Lubman, 2007), all participants were administered
173 the Penn Alcohol Craving Scale (Flannery *et al.*, 1999) immediately before and approximately
174 two weeks following the scan to assess any changes in alcohol craving patterns.

175

176 *2.3 Alcohol Screening*

177 The ALC participants met criteria for alcohol abuse or dependence, and consumed 21 or
178 more alcoholic drinks per week for five or more years. Extent of alcohol use was assessed by
179 calculating Quantity Frequency Index (QFI) scores (Cahalan *et al.*, 1969). QFI scores
180 approximate the number of drinks consumed per day, and take into consideration the amount,
181 type, and frequency of alcohol consumption either over the last six months (NC participants), or
182 over the six months preceding cessation of drinking (ALC participants), and yields an estimate of
183 ounces of ethanol per day. To remove the influence of current alcohol abuse, ALC participants
184 must have been abstinent for at least four weeks before the scan date to be included. The ALC
185 participants did not display symptoms of Korsakoff's Syndrome nor dementia (Oscar-Berman &
186 Maleki, 2019). Potential NC participants who had consumed 15-20 drinks per week for any
187 length of time or who engaged in binge drinking were disqualified.

188

189 2.4 Functional Imaging Task

190 All participants were given a delayed matching-to-sample memory task (Dolcos &
191 McCarthy, 2006) in a magnetic resonance imaging (MRI) scanner, whereby they were asked to
192 encode two faces that both had one of three emotional valences: positive, neutral, or negative
193 (Figure 1). The face stimuli were shown in grayscale and were taken from a set of faces used in a
194 previous study (Marinkovic *et al.*, 2009). These faces were displayed simultaneously for three
195 seconds, followed by an asterisk (*) for one second. Subjects were asked to maintain these faces
196 in memory while a colored distractor stimulus was shown. On different trials, the distractor
197 stimulus was either a picture of an alcoholic beverage (*alcbbev*; beer, wine, liquor, or mixed
198 drink), a picture of a nonalcoholic beverage (*nonalcbbev*; water, juice, milk, soda, coffee, tea,
199 etc.), or a scrambled nonsense picture (*scrambled*). Alcoholic and nonalcoholic beverage pictures
200 were a combination of images used with permission from the Normative Appetitive Picture
201 System (NAPS) (Stritzke *et al.*, 2004), and other previously published works on alcohol cues
202 (Grüsser *et al.*, 2000; Wrase *et al.*, 2002; Myrick *et al.*, 2004). Additional distractor images were
203 modified from digital photographs taken at bars, liquor stores, and convenience stores. The
204 scrambled images were created by inverting half the alcoholic and half the nonalcoholic
205 beverage images and distorting them until they were not recognizable as any particular object,
206 while preserving a match of primary visual characteristics. Each distractor picture was shown for
207 three seconds, followed by an asterisk (*) for one second. Following the distractor picture, a
208 single probe face was shown for two seconds, and the participants were instructed to report
209 whether this face was one of the two faces they had just seen.

210 Each trial was 10 seconds in length, and was followed by a variable delay period (with a
211 mean duration of 10 seconds, ranging from 2-22 seconds) during which the subject saw a set of
212 crosshairs (+++) serving as a visual fixation. The task was divided into nine runs, each of which
213 contained 18 trials. There were nine trial types made up of each combination of face valence and
214 distractor type (e.g., positive faces followed by alcohol distractor). Each emotion-distractor
215 combination appeared twice per run. The stimulus order and variable inter-trial intervals were
216 determined using *optseq2* (<http://surfer.nmr.mgh.harvard.edu/optseq>), which optimizes statistical
217 efficiency and hemodynamic response estimate accuracy for event-related experimental designs
218 (Dale, 1999). In total, there were 54 trials for each distractor type (combined across facial
219 expressions) and each face valence (combined across distractor types), for a total of 162 trials
220 across the entire scan. The stimulus faces were balanced to contain 50% male and 50% female
221 faces. Within a trial, the two encoded faces and probe face were matched on emotional
222 expression and gender. This way, on match trials the probe facial image was identical to one of
223 the encoded images, and on mismatch trials the facial identity changed but the emotional
224 expression and gender did not.

225 The probe face matched one of the encoded faces on 50% of the trials, and
226 match/mismatch trials appeared in a randomized order within each run. Responses were made by
227 pressing one of two buttons with the index finger (match) or middle finger (mismatch) of the
228 right hand. Participants were instructed to respond as quickly as possible without sacrificing
229 accuracy. Additionally, participants could immediately correct a response by pressing the
230 opposite button. To ensure the distractor images were viewed by all participants, they were told
231 that it was necessary to pay attention to the pictures shown in between the faces on each trial, as
232 they would be questioned about those images following the scan.

233

234 *2.5 Behavioral Task Analyses*

235 Responses to the face memory task were analyzed on the first level (individual subjects)
236 using custom Excel templates. Trials were organized by Distractor type, facial Emotion, and
237 Face Gender. Each trial was scored as correct, incorrect, or miss (*i.e.*, no response). When more
238 than one response was made to a trial, the last response type (*i.e.*, yes/match or no/nonmatch)
239 was accepted as the final answer, provided that the final response was at least 200 ms after the
240 preceding response and no more than 10 s following the preceding response. When a single
241 response was recorded and the reaction time was less than 200 ms, the trial was scored as a miss.
242 For each participant, a mean overall reaction time (regardless of trial type) was calculated.
243 Reaction times that exceeded three standard deviations from this mean were excluded from
244 reaction time calculations by trial type. Participants' patterns of responses were analyzed for
245 consecutive misses to assure that they remained awake throughout the task. Three separate runs
246 were identified, each in a different participant, wherein greater than five consecutive trials were
247 missed; these runs were excluded from behavioral analyses.

248 Second level (group) effects on percent correct and reaction time (correct trials) were
249 investigated using SPSS Version 17.0 (IBM, Chicago, IL, USA). Repeated-measures analyses of
250 variance (ANOVA) were carried out with between-subjects factors of Group (ALC or NC) and
251 Gender (female participant or male participant) and within-subjects factors of Distractor (alcbev,
252 nonalcbev, or scrambled), Emotion (positive, negative, or neutral), and Face Gender (female face
253 or male face).

254

255 2.6 Image Acquisition

256 Imaging was conducted at the Massachusetts General Hospital's Athinoula A. Martinos
257 Center for Biomedical Imaging in Charlestown, MA. Data were acquired on a 3 Tesla Siemens
258 (Erlangen, Germany) MAGNETOM Trio Tim MRI scanner with a 12-channel head coil. Sagittal
259 T1-weighted MP-RAGE scans (TR = 2530 ms, TE = 3.39 ms, flip angle = 7°, FOV = 256 mm,
260 slice thickness = 1.33 mm, slices = 128, matrix = 256 x 192) were collected for all subjects. For
261 most participants, two such volumes were collected and averaged to aid in motion correction. An
262 auto-align localizer was employed to adjust the acquired slices such that they ran parallel to an
263 imaginary plane between the anterior and posterior commissures. Echo planar functional MRI
264 blood oxygen level dependent (BOLD) scans were collected axially with 5 mm slice thickness
265 and 3.125 x 3.125 mm in-plane resolution (64 x 64 matrix), allowing for whole brain coverage
266 (32 interleaved slices, TR = 2 s, TE = 30 ms, flip angle = 90°). The event-related design included
267 18 trials per run with a total of nine runs. Within each six-minute run, 180 T₂*-weighted volumes
268 were collected. Functional volumes were auto-aligned to the anterior/posterior commissure line
269 to ensure a similar slice prescription was employed across participants. Prospective Acquisition
270 Correction (3D-PACE) was applied during collection of the functional volumes to minimize the
271 influence of participants' body motion (Thesen *et al.*, 2000). An IBM ThinkPad (Windows XP)
272 running Presentation version 11.2 (NeuroBehavioral Systems, Albany, CA) software was used
273 for visual presentation of the experimental stimuli and collection of participants' responses.
274 Stimuli were back-projected onto a screen at the back of the scanner bore and were viewed by
275 the participants through a mirror mounted to the head coil. All participants wore earplugs to
276 attenuate scanner noise.

277

278 2.7 Structural Image Processing

279 Structural MP-RAGE image analyses were performed for all participant data using the
280 FreeSurfer (version 4.5.0) image analysis suite (<http://surfer.nmr.mgh.harvard.edu>). A multi-
281 stage cortical surface reconstruction process was run on the two collected T1-weighted MP-
282 RAGE scans (Dale *et al.*, 1999), starting with motion correction, intensity normalization (Sled *et*
283 *al.*, 1998), Talairach registration (Talairach & Tournoux, 1988), skull stripping (Ségonne *et al.*,
284 2004), and segmentation (Fischl *et al.*, 2002) of white matter, gray matter, and ventricles.
285 Subsequently, boundaries were calculated delineating where gray and white matter meet, and
286 where gray matter adjoins cerebrospinal fluid (“pial surfaces”) based on maximal shifts in image
287 intensity between tissue types. These boundaries, as well as the subcortical segmentations, were
288 visually inspected on each coronal slice for every subject, and manual interventions (*e.g.*, white
289 matter volume corrections) were made when needed. The surface boundaries were used to
290 generate computationally inflated two-dimensional cortical surface models, which allowed
291 individual subjects to be registered to a spherical atlas by utilizing each subject’s cortical folding
292 patterns. This registration was used to align the cortical geometry of all subjects within a group.
293 Creation of these cortical surface models allowed improved data visualization as well as
294 improved accuracy of within-group co-registration relative to an affine morph procedure (Fischl
295 *et al.*, 1999). The cortical surface models were employed in an automated parcellation procedure
296 that divides the surface into subregions based on gyral and sulcal anatomy. The Destrieux atlas
297 parcellation for FreeSurfer (Destrieux *et al.*, 2010) was used to define anatomical ROI in the
298 functional analyses.
299

300 *2.8 Functional Image Processing and Statistical Analyses*

301 Effects of Group, Gender, Distractor, and Emotion on the BOLD signal were evaluated
302 using both a whole-brain cluster analysis as well as ROI analyses. Processing of the functional
303 data was performed using the FreeSurfer Functional Analysis Stream (FS-FAST) version 5.3,
304 SPSS Version 17.0, and Matlab 7.4.0.

305

306 **2.8.1 First-Level Functional Analyses**

307 Preprocessing of the functional images for first-level (individual subject) FS-FAST
308 analysis included motion correction, intensity normalization (Sled *et al.*, 1998), and spatial
309 smoothing with a 5-mm Gaussian convolution kernel at full-width half-maximum. Trials were
310 first combined across runs by distractor-emotional face valence pairs (i.e., alcbev-positive,
311 alcbev-negative, alcbev-neutral, nonalcbev-positive, nonalcbev-negative, nonalcbev-neutral,
312 scrambled-positive, scrambled-negative, scrambled-neutral) and then collapsed across emotional
313 valence. The BOLD response was estimated using a Finite Impulse Response (FIR) model,
314 which allows for estimation of the time course of activity (percent signal change for a given
315 condition) within a vertex or ROI for the entire trial period. For each condition, estimates of
316 signal intensity were calculated for 2 pre-trial and 10 post-trial onset TRs, for a total analysis
317 window of 24 seconds. Motion correction parameters calculated during alignment of the
318 functional images were entered into the analysis as external regressors. Alignment of the T2*-
319 weighted functional images with T1-weighted structural volumes was accomplished through an
320 automated boundary-based registration procedure (Greve & Fischl, 2009). These automated
321 alignments were manually inspected to ensure accuracy.

322 Statistical maps were generated for each of the 84 individual subjects for contrasts
323 between experimental conditions. Three contrasts were used to identify DMN regions (as
324 described below); they were made between distractor types and fixation: (1) alcbev vs. fixation,
325 (2) nonalcbev vs. fixation, and (3) scrambled vs. fixation. Another three contrasts were used to
326 assess cue responsivity: (1) alcbev vs. nonalcbev, (2) alcbev vs. scrambled, (3) nonalcbev vs.
327 scrambled. Analyses of each of these contrasts included removal of prestimulus differences
328 between the contrasted conditions by averaging the first three time points (two pre-trial onset and
329 one post-trial onset) for each condition and subtracting this mean from each time point for that
330 condition. Time points summed for inclusion in each contrast were chosen to reflect peak
331 stimulus-related activity: FIR estimates of hemodynamic responses to the distractors were
332 analyzed using a mean of the five TRs collected during the time period of 2-12 seconds post
333 distractor onset. Since the distractor is shown 4 seconds after the trial onset, the analysis window
334 is 6-16 seconds following trial onset (time points 3 through 8).

335

336 **2.8.2 Cortical Surface Cluster Analyses**

337 We investigated cue-related brain activation in two separate cortical brain networks: (1)
338 cue reactivity in DMN regions, and (2) cue reactivity in task-regions. The brain network that was
339 more active during presentation of the fixation cue than during the distractor images was used as
340 our measure of DMN regions (fixation-regions). The network that was more active during the
341 presentation of distractor images than during presentation of the fixation stimulus was used as
342 our measure of the task-regions. In what follows, we first describe masking procedures and
343 analyses we used to separate the networks.

344 The t -statistic maps for each condition vs. fixation were thresholded at $p < 0.05$ vertex-
345 wise and were used to generate binary masks (Figure 2) separating fixation-regions and task-
346 regions, thereby forming the six masks: alcbv greater than (or less than) fixation, nonalcbv
347 greater than (or less than) fixation, scrambled greater than (or less than) fixation. These masks
348 were used to separate the between-distractor analyses (described below).

349 Second-level (group) analyses on cortical regions were accomplished using FS-FAST, a
350 surface-based morphing procedure for intersubject alignment and statistics (Fischl *et al.*, 1999).
351 Group-averaged signal intensities during each experimental condition (alcbv, nonalcbv,
352 scrambled) relative to fixation were calculated using the general linear model in spherical space
353 for cortical regions, and were mapped onto the canonical cortical surface *fsaverage*, generating
354 group-level weighted random-effects t -statistic maps masked to include only the cortex.
355 Weighted random effects models were employed to reduce noise by taking into account
356 individual subject variance. A 5 mm smoothing kernel (full-width half-maximum) was employed
357 for all group and intergroup maps. Cluster correction on maps showing activity for each
358 distractor condition vs. fixation was applied using FS-FAST Monte Carlo simulation with a
359 clusterwise threshold of $p < 0.05$ corrected for three spaces (left hemisphere cortical, right
360 hemisphere cortical, and subcortical). Cortical surface cluster regions were identified by the
361 location of each cluster's peak vertex on the cortical surface according to the Desikan-Killiany
362 atlas (Desikan *et al.*, 2006).

363 When we examined brain activation differences between the distractor types, we used
364 three contrasts: alcbv vs. nonalcbv, alcbv vs. scrambled, and nonalcbv vs. scrambled. We
365 investigated each direction of these contrasts separately. For example, brain regions with higher

366 activation for alcbev than nonalcbev would be analyzed separately from those regions with
367 higher activation for nonalcbev than alcbev.

368 Intergroup comparison *t*-statistic maps were generated using FS-FAST by comparing
369 activation levels of all of the ALC participants with levels of all of the NC participants.
370 Additionally, Group-by-Gender interaction maps for each contrast were calculated.

371

372 **2.8.3 Region of Interest Analyses**

373 The anatomically-defined ROI for the distractor analyses included areas hypothesized *a*
374 *priori* to be implicated in alcohol craving, distractor interference, and working memory for
375 emotional faces, as described in the Introduction. These were DLPFC, VLPFC, OFC, insular
376 cortex, parahippocampal gyrus, hippocampus, amygdala, fusiform, ACC, and the multi-regional
377 EROS (Makris *et al.*, 2008; Sawyer *et al.*, 2017). Left and right hemisphere regions were
378 analyzed as separate ROI.

379 Statistical preprocessing and time course visualization of ROI data were performed using
380 scripts written for Matlab version 7.4.0. Signal intensity for each region was averaged across all
381 vertices (for surface-based ROI) or voxels (for volume-based ROI) included in the region for
382 each condition on the individual participant level. To compute percent signal change for each
383 participant within an ROI, signal estimate per condition and time point was divided by the
384 average baseline activity for that participant. Time courses were normalized at the individual
385 subject level for each condition by taking the mean of the first three time points (two pre-trial
386 and one post-trial onset) and subtracting this mean from each time point. Group and Group-by-
387 Gender averages of the normalized time courses were computed for each condition, and were

388 visualized by plotting the percent signal change for each condition at each time point (*i.e.*, TR) of
389 the trial.

390 For the distractor ROI analyses, percent signal changes of the BOLD signal within each
391 ROI for the time window from 2 to 12 sec after distractor onset were entered as dependent
392 variables into repeated-measures ANOVA models with between-group factors of Group (ALC or
393 NC) and Gender (men or women) and within-subjects factor of Distractor type (alcbev,
394 nonalcbev, or scrambled).

395

396 **3. Results**

397 *3.1 Research Participant Characteristics*

398 Table 1 summarizes means, standard deviations, and ranges of participant demographics,
399 drinking variables, and IQ and memory test scores.

400

	ALCOHOLICS			CONTROLS		
	ALC	ALCw	ALCm	NC	NCw	NCm
	<i>n</i> = 42	<i>n</i> = 21	<i>n</i> = 21	<i>n</i> = 42	<i>n</i> = 21	<i>n</i> = 21
Age^a (years)						
<i>mean</i>	53.9	53.4	54.4	53.9	57.7	50.2
<i>standard deviation</i>	11.0	11.4	10.8	12.4	13.6	10.1
<i>range</i>	26.5 - 76.7	26.5 - 73.0	26.6 - 76.7	25.8 - 76.9	25.8 - 76.9	29.0 - 69.6
Education^b (years)						
<i>mean</i>	14.7	15.3	14.1	15.5	15.6	15.4
<i>standard deviation</i>	2.0	2.0	1.9	2.0	2.3	1.6
<i>range</i>	12 - 19	12 - 19	12 - 18	12 - 19	12 - 20	12 - 18
WAIS-III Full Scale IQ						
<i>mean</i>	110.3	110.1	110.5	111.6	111.2	112.0
<i>standard deviation</i>	15.0	14.2	16.0	16.3	19.3	13.1
<i>range</i>	72 - 140	72 - 137	81 - 140	79 - 152	79 - 142	90 - 152
WMS-III IMI						
<i>mean</i>	109.7	114.4	104.7	111.9	114.8	109.0
<i>standard deviation</i>	16.6	18.3	13.4	16.9	16.4	17.4
<i>range</i>	63 - 144	63 - 144	82 - 130	80 - 146	84 - 138	80 - 146
WMS-III DMI						
<i>mean</i>	112.6	116.7	108.3	111.8	113.5	110.1
<i>standard deviation</i>	17.3	20.4	12.5	16.0	14.9	17.2
<i>range</i>	52 - 140	52 - 140	86 - 132	83 - 150	83 - 140	84 - 150
Duration of Heavy Drinking^{cdef} (years)						
<i>mean</i>	17.4	14.3	20.5	0.0	0.0	0.0
<i>standard deviation</i>	7.7	5.2	8.5	0.0	0.0	0.0
<i>range</i>	5.0 - 35.0	6.0 - 25.0	5.0 - 35.0	0.0 - 0.0	0.0 - 0.0	0.0 - 0.0
Quantity Frequency Index^{cde} (ounces ethanol/day; ~drinks/day)						
<i>mean</i>	11.2	8.7	13.7	0.3	0.2	0.4
<i>standard deviation</i>	8.8	5.8	10.5	0.6	0.5	0.7
<i>range</i>	2.7 - 38.4	2.7 - 28.1	4.5 - 38.4	0.0 - 2.6	0.0 - 2.4	0.0 - 2.6
Length of Sobriety^{cde} (years)						
<i>mean</i>	8.3	10.6	5.9	2.1	3.6	0.5
<i>standard deviation</i>	10.3	11.1	8.8	6.4	8.5	1.3

<i>range</i>	0.1 - 32.3	0.1 - 32.1	0.1 - 32.3	0.002 - 29.2	0.002 - 29.2	0.002 - 5.1
Penn Alcohol Craving Scale^{cde}						
<i>mean</i>	3.8	3.8	3.9	1.2	1.1	1.3
<i>standard deviation</i>	4.4	5.1	3.8	2.0	2.2	1.8
<i>range</i>	0 - 19	0 - 19	0 - 12	0 - 9	0 - 9	0 - 5
Hamilton Rating Scale for Depression^g						
<i>mean</i>	3.5	4.9	2.2	2.4	3.1	1.8
<i>standard deviation</i>	4.2	4.1	4.0	2.8	3.3	2.1
<i>range</i>	0 - 18	0 - 17	0 - 18	0 - 12	0 - 12	0 - 8

401 **Table 1. Participant characteristics**

402 Participants Characteristics ($p < 0.05$): ^aControl Women > Control Men; ^bControl Men > Alcoholic Men;
 403 ^cAlcoholics > Controls; ^dAlcoholic Men > Control Men; ^eAlcoholic Women > Control Women; ^fAlcoholic Men >
 404 Alcoholic Women; ^gAlcoholic Women > Alcoholic Men. See Results for additional details on number of
 405 participants.

406 Abbreviations: WAIS = Wechsler Adult Intelligence Scale; WMS = Wechsler Memory Scale; IMI = Immediate
 407 Memory Index; DMI = Delayed Memory Index. Five NCm and two NCw reported being lifetime abstainers, and
 408 one NCw was unable to report an accurate length of sobriety.

409

410 The ALC and NC groups did not differ significantly by age. Although the NCw were
 411 older than the NCm, controls did not differ significantly from their respective ALC counterparts
 412 by age. ALCm had on average one year less education relative to NCm. Groups did not differ
 413 significantly on WAIS-III Full Scale IQ scores. While ALCw had higher Hamilton Rating Scale
 414 for Depression scores than AUDm, the average scores for all four subgroups (ALCm, ALCw,
 415 NCm, and NCw) were low (all means below 5, whereas mild depression threshold is 8), so
 416 depression likely contributed little to our observed gender differences.

417 By definition, the ALC group had longer durations of heavy drinking than the NC group.

418 The ALCm on average drank heavily for six years more than did the ALCw, and showed a trend

419 toward drinking larger average daily quantities (QFI, $F_{1,40} = 3.66$, $p = 0.06$). Five NCm and two
420 NCw reported being lifetime abstainers (and as such did not have relevant length of sobriety
421 values). The ALC group reported higher levels of craving for alcohol than the NC group on the
422 PACS administered immediately prior to the scan; ALCm and ALCw did not differ on reported
423 level of pre-scan alcohol craving. Eighty-one of the 84 participants were reached approximately
424 two weeks after their scan date to be reassessed on alcohol craving level. One ALCw, one
425 ALCm, and one NCw could not be reached for follow up assessment on PACS scores. Neither
426 the ALC group nor the NC group displayed an increase in alcohol craving (*i.e.*, a significant
427 change in PACS scores) from the assessment on their scan date to their follow up assessment.

428

429 *3.2 Behavioral Results*

430 Measures of participant performance on the face memory task were calculated for overall
431 performance and for performance by each Distractor type and facial Emotion. Means, standard
432 deviations, and ranges are reported for percent correct responses and reaction times in Table A1
433 and Table A2, respectively.

434 A significant Group-by-Gender interaction was found for accuracy ($F_{1,80} = 6.880$, $p =$
435 0.01 , Figure A1 and Table A1). The significant interaction indicated that the better performance
436 for the ALCw than the ALCm was larger than the difference between NCw and NCm. Accuracy
437 and reaction times did not vary significantly as a function of the Distractor, nor were there any
438 significant interactions of Distractor with Group or Gender (all $p > 0.05$). The main effect of
439 Emotion was significant for percent correct responses, wherein ALC and NC participants alike
440 performed better on both positive and negative faces relative to neutral faces. Performance on
441 positive and negative faces did not differ significantly. The effect of Emotion on percent correct

442 responses did not vary as a function of Group or Gender (all $p > 0.05$). Regarding reaction time
443 and Emotion, participants responded more quickly to positive face trials relative to neutral face
444 trials; this effect did not vary by Group nor by Gender. The main effect of Face Gender on
445 percent correct responses also was significant ($F_{1,80} = 6.80, p = 0.01$), with the overall
446 performance being better for male than for female faces. The effects of Group and Gender on
447 percent correct responses and reaction times for Face Gender were not significant (all $p > 0.05$).

448

449 *3.3 fMRI BOLD Effects*

450 Effects of the distractors on the BOLD signal were assessed using group and intergroup
451 cluster analyses for cerebral cortex, along with a-priori analyses of anatomical ROI that had been
452 implicated by the literature. Below, we report group analyses of fixation contrasts and between-
453 distractor conditions, followed by intergroup analyses of the same contrasts.

454

455 **3.3.1 Cortical Cluster Analyses of Distractor Effects**

456 Analyses of task contrasts revealed broadly similar activation patterns for the ALCw,
457 ALCm, NCw, and NCm groups. During fixation, regions involved in the DMN (the anatomical
458 network described in the Introduction) were significantly more active than during the
459 presentation of distractor images. We refer to those more active regions as fixation-regions. As
460 detailed in the Methods, these regions were masked and examined separately for subsequent
461 analyses of contrasts between distractor types. Identical analyses were then performed for the
462 task-regions. Significant clusters for between-distractor contrasts can be seen for fixation-regions
463 first (Figure 3 and Figure A3), and then for task-regions (Figure 4 and Figure A4).

464 All four groups had more brain activity (Table A3) in response to alcbev than scrambled
465 distractors in the four main fixation-regions (the anterior and posterior medial hub regions, the
466 temporal parietal junction, and the middle temporal gyrus), while the nonalcbev vs. scrambled
467 contrast was less consistent. The alcbev vs. nonalcbev contrast generally indicated higher
468 activation for the alcbev than nonalcbev. For task-regions, alcbev and nonalcbev elicited higher
469 activation than scrambled in the occipital lobe and adjoining visual areas in temporal and parietal
470 cortex (Table A3, Figure A4).

471

472 **3.3.2 Distractor Intergroup Cluster Analyses**

473 The pattern of results indicated that ALCw and NCm had strong activation contrasts
474 (beverages > scrambled) in visual areas and the medial DMN regions, especially the posterior
475 hub. The ALCw had greater activation contrast than NCw, while ALCm had lower activation
476 contrast than NCm. Table 2 summarizes the regions where significant Group-by-Gender
477 interactions were found for the distractor contrasts, i.e., for alcbev vs. nonalcbev, alcbev vs.
478 scrambled, and nonalcbev vs. scrambled. Table A4 provides all significant Group-by-Gender
479 interactions, and Figure 3, Figure 4, Figure A3, Figure A4 illustrate alcbev vs. scrambled
480 contrasts. In total, we observed 22 clusters where the Group-by-Gender interaction was
481 statistically significant: Seven in fixation-regions and 15 in task-regions.

482

483

Fixation Masking	Distractor Contrast	Clusters	Annotation (Hemisphere: Number of Clusters)
fixation-regions	alcbev > scrambled	4	superior frontal (L: 1, R: 2), precuneus (R: 1)
fixation-regions	nonalcbev > scrambled	3	superior frontal (R: 2), caudal middle frontal (R: 1)
task-regions	alcbev > scrambled	5	superior parietal (L: 1, R: 2), fusiform (R: 1), lingual (R: 1)
task-regions	nonalcbev > scrambled	4	superior parietal (L: 1, R: 1), lateral occipital (R: 2)
task-regions	scrambled > nonalcbev	4	superior frontal (L: 2), rostral middle frontal (L: 2)
task-regions	nonalcbev > alcbev	2	superior frontal (L: 2)

484 **Table 2. Group-by-gender cortical cluster summary**

485 Annotations (using the Desikan-Killiany atlas) are shown for each of the 22 clusters with significant Group-by-
486 Gender interactions in distractor contrasts. The Fixation Masking column refers to the separate analyses conducted
487 for fixation-regions and task-regions as shown in Figure 2. The clusters reported can be understood to span multiple
488 functional regions [71]. That is, they are not limited to a single region, as reported by the maximal vertex or voxel.
489 Abbreviations: alcbev = alcoholic beverages; nonalcbev = nonalcoholic beverages; L = left hemisphere; R = right
490 hemisphere. See Table A4 for detailed cluster information. Note: for the fixation-regions, superior frontal and caudal
491 middle frontal are part of the anterior hub; and precuneus is part of the posterior hub.

492

493 For the seven clusters in fixation-regions, six were in the anterior hub and one was in the
494 posterior hub. For alcbev > scrambled, we observed one cluster in the posterior hub and three in
495 the anterior hub. For three of these four clusters, ALCw and NCm had the strongest contrasts; in
496 the fourth cluster, ALCw had the strongest contrast, whereas ALCm had the weakest. The
497 remaining three clusters were found for nonalcbev > scrambled. As with the alcbev contrasts,
498 ALCw and NCm had the strongest contrasts. All three clusters were in the right hemisphere of
499 the anterior hub. Thus, the overall pattern consistent among the seven clusters was as follows:
500 NCm had stronger contrast (beverage > scrambled) than ALCm, while muted or opposite
501 direction comparison was observed for the women.

502 Of the 15 task-regions clusters, two were found for nonalcbev > alcbev (left superior
503 frontal cortex). In both clusters, NCw had higher activation to nonalcoholic beverages, while
504 NCm had higher activation to alcoholic beverages. In the other 13 clusters, the strongest
505 contrasts were found for NCm and ALCw. Of those, the significant interactions were found in
506 visual regions where nonalcbev > scrambled, while significant interactions in frontal regions
507 were found for scrambled > nonalcbev.

508 Setting aside gender, analyses of activation levels comparing ALC and NC groups
509 revealed 15 cortical clusters with significantly greater contrast levels for the ALC group than for
510 the NC group (Table A5). Two of the clusters were in the DMN: one alcbev-region
511 (temporoparietal junction), and one nonalcbev-region (posterior hub). The other 13, all alcbev-
512 regions, were in task-regions located throughout the cortex: 7 frontal, 3 temporal, 2 parietal, and
513 1 occipital.

514

515 **3.3.3 Distractor Region of Interest Analyses**

516 Results of ANOVAs examining between-subjects effects of Group and Gender and
517 within-subjects effects of Distractor type on BOLD percent signal change within each ROI are
518 summarized in Table 3. Reported means and standard deviations represent the percent signal
519 change across each ROI (unmasked) for the time period of 2 to 12 seconds post-distractor
520 stimulus onset. These anatomically-defined ROI included regions in EROS areas (Makris *et al.*,
521 2008; Sawyer *et al.*, 2017), as well as in regions associated with face memory maintenance and
522 distractor interference, as described in the Introduction and Methods.

523 Results from the ROI analyses of distractor effects indicated strong effects of distractor
524 type on neural activation patterns. Specifically, among all participants, significantly higher

525 responses were observed in several regions (EROS, left DLPFC, left VLPFC, right OFC,
526 bilateral parahippocampal gyrus, bilateral hippocampus, bilateral amygdala, and bilateral
527 fusiform) to both alcbev and nonalcbev relative to scrambled stimuli. The effect was
528 significantly larger for the ALC group than the NC group in the left EROS and left fusiform
529 regions, and in four prefrontal brain areas (left DLPFC, left VLPFC, left OFC, and right OFC).
530 Additionally, in the alcbev vs. nonalcbev contrast, the ALC group showed significantly higher
531 responses than the NC group in the left OFC ROI. Figure 5 shows percent signal change over
532 time for the OFC, VLPFC, fusiform, and ACC activation, to demonstrate representative activity
533 patterns. The left OFC shows the heightened activation for alcbev for the ALC group, the
534 fusiform and VLPFC show higher activation in both groups to both beverage types, and the ACC
535 demonstrates how activation is lower during distractor presentation than during fixation (for both
536 groups and for all three distractor types).

537 Applying a Bonferroni correction accounting for all 25 tests would set a critical value for
538 statistical significance of main effects and Distractor, Group, and Gender interactions at $p <$
539 0.002. Using this threshold, main effects of Distractor would remain significant in left OFC,
540 bilateral parahippocampal gyrus, bilateral hippocampus, right amygdala, and bilateral fusiform
541 gyrus. All main effects of Group and Gender, as well as all interaction effects were $p > 0.002$.

542

	ALCOHOLICS				NONALCOHOLIC CONTROLS				
	Alcoholic Beverage	Nonalcoholic Beverage	Scrambled Picture	Distractor Main Effect	Alcoholic Beverage	Nonalcoholic Beverage	Scrambled Picture	Distractor Main Effect	Distractor by Group
	Percent Signal Change: Mean \pm SD			$F_{1,41}$	Percent Signal Change: Mean \pm SD			$F_{1,41}$	$F_{1,80}$
EROS	.073 \pm .093	.059 \pm .072	.030 \pm .068	8.795*ab	.047 \pm .089	.051 \pm .085	.040 \pm .063	.407	3.650 ⁺
EROS LH	.071 \pm .097	.058 \pm .079	.024 \pm .071	10.567*ab	.049 \pm .093	.055 \pm .093	.040 \pm .066	.580	4.217*
EROS RH	.075 \pm .093	.061 \pm .071	.037 \pm .069	7.003*a	.047 \pm .089	.048 \pm .081	.041 \pm .067	.247	3.034 ⁺
DLPFC LH	.060 \pm .111	.049 \pm .103	.017 \pm .085	7.529*ab	.041 \pm .098	.047 \pm .096	.040 \pm .073	.032	4.481*
DLPFC RH	.069 \pm .111	.060 \pm .094	.039 \pm .077	3.953 ⁺	.034 \pm .097	.035 \pm .093	.039 \pm .077	.169	3.382 ⁺
VLPFC LH	.198 \pm .132	.181 \pm .147	.145 \pm .111	11.680*ab	.157 \pm .115	.182 \pm .129	.154 \pm .097	.062	5.820*
VLPFC RH	.210 \pm .122	.195 \pm .134	.173 \pm .124	5.387*a	.157 \pm .114	.174 \pm .134	.155 \pm .104	.039	2.925 ⁺
OFC LH	.125 \pm .130	.090 \pm .135	.057 \pm .107	16.019*ac	.071 \pm .164	.085 \pm .193	.058 \pm .157	.399	6.105*
OFC RH	.256 \pm .179	.234 \pm .203	.178 \pm .210	10.130*ab	.184 \pm .224	.195 \pm .249	.177 \pm .199	.176	5.608*
Insula LH	.104 \pm .105	.096 \pm .091	.069 \pm .077	5.920*a	.067 \pm .088	.082 \pm .080	.066 \pm .061	.001	3.275 ⁺
Insula RH	.098 \pm .097	.082 \pm .091	.068 \pm .073	4.084*a	.061 \pm .088	.068 \pm .075	.059 \pm .066	.025	2.109
Parahippocampal LH	.126 \pm .149	.125 \pm .098	.052 \pm .101	12.216*ab	.130 \pm .136	.136 \pm .141	.083 \pm .100	4.915*ab	0.894
Parahippocampal RH	.156 \pm .140	.136 \pm .093	.083 \pm .090	12.220*ab	.160 \pm .119	.167 \pm .126	.109 \pm .090	9.013*ab	0.743
Hippocampus LH	.085 \pm .131	.077 \pm .096	.021 \pm .094	13.908*ab	.050 \pm .108	.054 \pm .105	.012 \pm .090	7.179*ab	1.394
Hippocampus RH	.088 \pm .120	.066 \pm .083	.024 \pm .088	11.669*ab	.077 \pm .106	.074 \pm .088	.038 \pm .085	7.955*ab	1.134
Amygdala LH	.093 \pm .188	.098 \pm .154	.041 \pm .154	6.019*ab	.094 \pm .194	.095 \pm .203	.064 \pm .137	2.207	0.581
Amygdala RH	.105 \pm .140	.089 \pm .126	.027 \pm .134	14.976*ab	.121 \pm .175	.118 \pm .160	.085 \pm .130	4.389*a	2.519
ACC LH	-.059 \pm .119	-.080 \pm .094	-.095 \pm .106	5.019*a	-.092 \pm .109	-.088 \pm .116	-.089 \pm .105	.036	3.195 ⁺
ACC RH	-.056 \pm .119	-.068 \pm .102	-.080 \pm .111	2.026	-.085 \pm .107	-.089 \pm .100	-.085 \pm .097	0.000	1.179
Fusiform LH	.758 \pm .258	.743 \pm .207	.553 \pm .120	65.492*ab	.705 \pm .285	.724 \pm .294	.579 \pm .259	22.579*ab	4.803*
Fusiform RH	.855 \pm .303	.851 \pm .234	.669 \pm .229	49.514*ab	.823 \pm .292	.845 \pm .301	.694 \pm .253	49.438*ab	3.322 ⁺

543 **Table 3. Percent signal change for each distractor type by group, for a-priori regions**

544 Distractor by Group F-values are reported from a full factorial ANOVA model with between-groups factors of
 545 Group and Gender and within-groups factor of Distractor type. Distractor main effect F-values within each group are
 546 reported from ANOVA model including within-subjects factor of Distractor type. Abbreviations: EROS = Extended
 547 Reward and Oversight System; DLPFC = Dorsolateral Prefrontal Cortex; VLPFC = Ventrolateral Prefrontal Cortex;
 548 OFC = Orbitofrontal Cortex; ACC = Anterior Cingulate Cortex; LH = Left Hemisphere; RH = Right Hemisphere

549 a. Alcoholic Beverage > Scrambled Picture, $p < .05$

550 b. Nonalcoholic Beverage > Scrambled Picture, $p < .05$

551 c. Alcoholic Beverage > Nonalcoholic Beverage, $p < .05$

552 * $p < .05$

553 +.05 < $p < .10$

554

555 **4. Discussion**

556 *4.1 Behavioral Responses to Probe Face and Distractor Cues*

557 In this study, ALC and NC participants alike were able to use emotional face valence
558 information to improve face memory, as assessed by a DMTS task (LeDoux, 1996; Dolcos *et al.*,
559 2005; Dolcos & McCarthy, 2006). This was evidenced by better memory performance (*i.e.*,
560 higher accuracy) on positive and negative faces, and faster reaction times to positive faces, than
561 neutral faces. Because it has been shown that alcoholism is associated with impaired emotional
562 perception, and specifically impaired emotional face decoding (Oscar-Berman *et al.*, 1990;
563 Philippot *et al.*, 1999; Clark *et al.*, 2007; Marinkovic *et al.*, 2009; Hoffman *et al.*, 2019; Lewis *et*
564 *al.*, 2019), we had postulated that normal enhancement of memory by emotional content (in this
565 case, emotional facial expressions) would not be as strong in the ALC group. In those studies,
566 the ALC groups were mostly or exclusively men. However, our results suggest that the ability to
567 use emotional information to aid face memory implicitly may be relatively preserved in AUDw.
568 A significant Group-by-Gender interaction was observed on recognition accuracy as shown in
569 Figure A1 and Table A1. Although the Group-by-Gender interaction for reaction times was not
570 significant (Figure A2 and Table A2), the pattern is congruent with the accuracy data. The higher
571 accuracy of the ALCw (~6 percentage points better than ALCm or NCw) may reflect their
572 greater focus and sensitivity to emotional faces and resistance to distraction or underlying
573 differences in personality or motivation (Mosher Ruiz *et al.*, 2017).

574 We had postulated that the ALC group would show more recognition errors after alcohol
575 distractors (relative to other distractor types), whereas the NC group would not. However, we
576 found that regardless of the group, the distractor type did not substantially influence accuracy or
577 reaction time. Although we also had expected performance by the ALC group to be impaired by

578 alcoholic beverage cues, a significant interaction between group and distractor type was not
579 evident. We did not find an attentional bias effect: The alcoholic beverage distractors (relative to
580 nonalcoholic beverage or scrambled picture distractors) did not disproportionately decrease the
581 number of correctly recalled faces among either the ALC or the NC groups. A review by Field
582 and Cox (2008) suggested that the strength of the bias among ALC groups depends on drinking
583 history. Interestingly, Loeber and colleagues (2009) found that reduced attentional biasing to
584 alcohol cues was associated with longer durations of heavy drinking, and our sample also had
585 long durations. Combining participants with variable drinking histories might have masked the
586 attentional biasing effect. However, measures of neural activity may be more sensitive than
587 behavioral measures to changes associated with long-term heavy drinking.

588

589 *4.2 Distractor fMRI Contrasts*

590 The fMRI contrasts revealed broadly similar patterns of brain activity among the four
591 groups, for both fixation-regions and task-regions. In both brain networks, the beverages (alcbev
592 and nonalcbev) elicited higher activation than the scrambled distractors. This amounts to internal
593 replications of our present fMRI results, with four independent samples (ALCm, ALCw, NCm,
594 and NCw) revealing the same fixation-regions, same task-regions, and with mostly the same
595 direction of effects for task contrasts within those regions. The results reflect the existence,
596 location, and extent of the DMN (Buckner & DiNicola, 2019; Uddin *et al.*, 2019), and also
597 indicate that beverage pictures elicit higher activation than scrambled pictures in the DMN.
598 Moreover, our results indicate that DMN regions are sensitive to the informational content of
599 visual stimuli. In task-regions, the occipital lobe, along with adjoining visual areas in temporal
600 and parietal cortex, were clearly more activated by beverage stimuli than by scrambled images.

601 The results further suggest that content processing is not solely performed by those visual
602 regions, because activation to beverage cues was identified in middle to posterior cingulate
603 regions, which are involved in a multitude of cognitive functions (Heilbronner & Hayden, 2016;
604 Yeo *et al.*, 2016).

605

606 *4.3 Gender Differences*

607 The present research provides further evidence for the importance of considering gender
608 when exploring effects of alcoholism on the brain (Mann *et al.*, 2005; Ruiz *et al.*, 2013). Many
609 factors contribute to the observed differences in function for abnormalities identified comparing
610 ALCm with NCm vs ALCw with NCw.

611 Cortical group-level cluster analyses revealed significant Group-by-Gender interaction
612 effects in 22 clusters. The general pattern of those findings indicated that ALCm had lower
613 activation contrasts than NCm, while ALCw had higher activation contrasts than NCw. This
614 pattern was observed primarily in contrasts between beverage and scrambled distractor
615 conditions, and they were found in the two core medial DMN regions, as well as in visual
616 association cortices. A similar pattern of results was found in a previous report (Sawyer *et al.*,
617 2019) in which emotional vs. neutral image contrasts were lower in ALCm than NCm, and
618 stronger in ALCw than NCw. The lower brain reactivity for ALCm, and higher for ALCw,
619 highlighted gender effects, suggesting possible differences in the underlying basis for
620 development of AUD. Of note, the results from other modalities also have indicated similar
621 directions of the fMRI effects, with ALCw having larger reward regions than NCw, and higher
622 fractional anisotropy than NCw, as compared to the smaller regions and lower fractional
623 anisotropy found for ALCm than NCm (Sawyer *et al.*, 2017, 2018).

624 The gender-divergent abnormalities in the anterior and posterior hub regions of the DMN
625 could be reflective of other gender differences observed in conjunction with AUD. The role of
626 these regions in internal monitoring could relate to differences in pre-existing risk factors (Ruiz
627 & Oscar-Berman, 2015; Brighton *et al.*, 2016; Mosher Ruiz *et al.*, 2017), or could represent
628 differential consequences of alcohol abuse (Merrill & Read, 2010). A similar pattern of group
629 differences was identified in cortical regions associated with visual processing. That is, the
630 results could represent a more fundamental impact that is not regionally-specific. In the present
631 study, effects of both increased activation in reward regions and decreased deactivation in DMN
632 regions in response to alcohol pictures were strongest among ALCw in particular. One reason
633 stronger alcohol cue-specific responses were observed among ALCw could be related to gender-
634 based differences in physiological responses to alcohol cues (Rubio *et al.*, 2013). Aligned with
635 this, larger responses to alcohol cues by female social drinkers relative to male social drinkers
636 have been reported in superior and middle frontal gyri (Seo *et al.*, 2011).

637 Another explanation for greater effects of alcohol cues among women than men could be
638 related to depression (Saraceno *et al.*, 2012). Symptoms of depression among non-treatment
639 seeking heavy drinkers were reported to be correlated with increased activation in response to
640 alcohol cue exposure in the insula, cingulate, ventral tegmentum, striatum, and thalamus
641 (Feldstein Ewing *et al.*, 2010). Because ALCw tend to experience depression and anxiety
642 symptoms (Benishek *et al.*, 1992; Schulte *et al.*, 2009), we expected to see higher responses to
643 alcohol cues among ALCw than ALCm in these regions. Indeed, in our sample, ALCw had
644 higher Hamilton Rating Scale for Depression scores than did ALCm, although the scores for men
645 and women were low.

646

647 4.4 Group Differences

648 In addition to significant gender interactions, we identified regions with differences
649 between the ALC and NC groups. For the simple comparisons of the ALC group with the NC
650 group, cluster analyses showed that the ALC group had higher activation in 2 fixation-regions
651 and 13 task-regions (Table A5). Differences in the posterior hub were identified in regions with
652 stronger activation to nonalcoholic beverages than to scrambled images, while the other clusters
653 had stronger activation to alcoholic beverages. The higher contrasts observed for the ALC group
654 indicate a processing bias toward beverage cues across fixation- and task-regions. Further, the
655 fact that this cue-sensitivity is not isolated to a single region in the brain likely reflects a
656 widespread divergence in emotional and cognitive activity.

657

658 4.5 Brain Responsivity in Fixation-Regions (Default Network)

659 Compared to the NC group, cluster analyses showed that the ALC group, and the ALCw
660 in particular, had stronger contrasts in the anterior and posterior hubs, along with the
661 temporoparietal junction. The results for ROI that include DMN regions also support the finding
662 of contrast dampening in response to alcohol cues. Abnormal DMN functioning has been
663 observed in other addictions and neuropsychiatric conditions (Broyd *et al.*, 2009; Bednarski *et*
664 *al.*, 2011; Zhou *et al.*, 2020). In AUD, abnormal functional connectivity among DMN regions
665 has been reported (Chanraud *et al.*, 2011). ALCw in particular had stronger contrasts for both the
666 anterior and posterior hubs, an abnormality which could indicate a limitation in the level of detail
667 processed, or the way in which it is integrated (Sormaz *et al.*, 2018). Lower activation of the
668 anterior hub specifically has been associated with dynamic attention allocation during task
669 executions (Koshino *et al.*, 2011), suggesting that reduced deactivation of this region during

670 viewing of alcoholic beverage pictures among alcoholics could be associated with failure to
671 reallocate attention back to the task when the alcohol distractors were presented.

672

673 *4.6 Brain Responsivity in Regions of Interest*

674 The ROI analysis of the OFC provides evidence for reward-specific processing in the
675 ALC group. In particular, reward-specific processing refers to their higher activation from the
676 contrast between alcbev and nonalcbev. Several studies have reported enhanced OFC activation
677 to alcohol cues (Wrase *et al.*, 2002; Myrick *et al.*, 2008; Ray *et al.*, 2010; Shields & Gremel,
678 2020), and research has established the role of the OFC in alcohol and drug addiction more
679 generally (Goldstein & Volkow, 2002). The OFC activity may be particularly important for
680 preoccupation and anticipation stages of the addiction cycle (Koob & Volkow, 2010).

681 Additionally, activity in this region has been shown to correlate with subjective craving ratings
682 of viewed alcohol cues (Myrick *et al.*, 2004), and further correlated with relapse risk (Reinhard
683 *et al.*, 2015).

684 In many ROI, differences in activation levels among beverage distractor conditions
685 (alcoholic and nonalcoholic) were larger relative to scrambled pictures in the ALC group than in
686 the NC group. The higher responsivity of the ALC group to alcoholic beverages supports our
687 hypothesis of greater attentional bias in the form of stronger alcbev vs. nonalcbev activity
688 contrasts, but we did not expect the ALC group to have greater activation than the NC group to
689 nonalcoholic beverages relative to scrambled cues. One explanation for this result is that many of
690 the nonalcoholic beverages contain caffeine or sugar (*e.g.*, coffee, tea, soda), which, like
691 alcoholic beverages, also stimulate reward-network activity (Garber & Lustig, 2011). As was
692 suggested in an earlier meta-analysis (Field *et al.*, 2009), the attentional bias for caffeine-related

693 cues may correlate more strongly with subjective craving than for alcohol-related cues.

694 Moreover, craving for both caffeine and alcohol utilize similar neural circuits as are used for
695 processing alcohol reward (Kunz *et al.*, 2008), as do the effects of sugar-related reward (Avena
696 *et al.*, 2008; Volkow *et al.*, 2013).

697 The regions that responded more to beverage cues relative to the scrambled pictures were
698 the total EROS and many of its subcomponents (DLPFC, VLPFC, OFC, parahippocampal gyrus,
699 hippocampus, amygdala) and fusiform. In all of the regions where an interaction of Distractor
700 type and Group was identified, the distractor effect was found to be significant among the ALC
701 group, but not among controls. In the EROS, DLPFC, VLPFC, and OFC, the distractor effect in
702 the ALC group was driven by greater activity during both alcoholic and nonalcoholic beverage
703 pictures relative to scrambled pictures. In the OFC, however, the alcohol distractors elicited more
704 activity in the ALC group than did the nonalcoholic beverages or the scrambled pictures. Thus,
705 the strongest ROI effect specific to processing alcohol cues was observed in the OFC. Crucially,
706 this effect was observed only in the ALC group and not in the NC group (*i.e.*, for controls, no
707 ROI were identified where alcohol distractor pictures elicited more activity than did nonalcoholic
708 beverages; see Table 3). The OFC is believed to play a major role in craving and reward function
709 (Koob & Volkow, 2010).

710 Responses to alcohol and nonalcoholic beverage pictures in the fusiform gyrus were
711 strong among the ALC and NC groups (Figure 5D), as expected, given the fusiform's role in
712 visual object recognition (Pourtois *et al.*, 2009). We hypothesized further that the ALC group's
713 decreased BOLD signal in the fusiform gyrus in response to alcohol cues would provide
714 evidence for stronger distractor interference with face memory maintenance. However, our
715 results showed that any diminishment of the BOLD signal in the fusiform was far outweighed by

716 its initially higher responses to the alcohol cues. While reductions in fusiform response across
717 the time window of distractor analysis are apparent in the activation time course, an alcohol-
718 specific decrement in the ALC group was not clear. The fact that BOLD responses in the
719 fusiform ROI were consistently lower for scrambled pictures relative to alcohol and nonalcoholic
720 beverage pictures in both the ALC and NC groups suggests that the differences in visual
721 processing demands between conditions may have overridden any potential reduction in the
722 BOLD signal as a result of distractor interference.

723 We hypothesized that a failure to inhibit distractor interference in response to alcohol
724 cues would be associated with lower activity in VLPFC, given this region's role in inhibition of
725 task-irrelevant distracting stimuli (Thompson-Schill *et al.*, 2002; Aron *et al.*, 2004). However,
726 our ROI results showed similarly increased activation of this region for both alcohol and
727 nonalcoholic beverage cues relative to scrambled pictures. This finding suggests that rather than
728 a failure of VLPFC to inhibit distracting stimuli, the higher activity in this region might result
729 from the overriding demand of emotional and reward salience of the alcohol cues. Alternatively,
730 the VLPFC could be involved in inhibition regardless of the distractor type employed during the
731 DMTS delay.

732

733 *4.7 Limitations*

734 It is not clear to what degree the abnormalities we observed result from or predate heavy
735 drinking. The mean abstinence period for the ALC group was 8.3 years, and since the NC group
736 did not have an 'abstinence period,' we could not covary for sobriety. Still, our AUD cohort had
737 drinking history values representative of the national population (World Health Organization,
738 2019), which thereby improves the generalizability of our results. Sobriety in our subject cohort

739 points to how persistent the processing deficits in AUD populations are, and how short- and
740 long-term abstinence may have different paths of recovery for men and women (Fama *et al.*,
741 2020). Nonetheless, our findings illustrate how critical it is to pursue research examining gender
742 differences regarding attentional bias towards reward-related stimuli and pathological alcohol
743 consumption.

744 In conjunction with the multiple-comparison cluster correction procedures employed, the
745 significance level we used ($p < .05$) has been shown to have higher false-positive rates than
746 expected (Eklund *et al.*, 2016). However, stricter thresholds would increase the chance of false-
747 negative errors, and the significance level we used allows the size of the gender effects to be
748 highlighted. Although we report cluster labels by the location of the peak voxel or vertex, the
749 clusters reported can be understood to span multiple functional regions (Woo *et al.*, 2014). That
750 is, they are not limited to a single region, as reported by the maximal vertex or voxel.

751 Finally, our analyses did not include factors such as cigarette smoking, body mass index,
752 and hormone therapy (Luhar *et al.*, 2013; Oscar-Berman *et al.*, 2014), which could possibly
753 influence alcohol cue processing, reward, and DMN activity.

754

755 **5. Conclusions**

756 Compared to the NC group, the ALC group had stronger activation for DMN regions, and
757 overactivated reward regions during alcohol cue distraction. This suggests that attentional
758 capture is not limited to reward regions, but also includes DMN regions. If so, the DMN has a
759 role in processing salient aspects of addictive substances.

760 The present study showed that alcohol cue distractors have powerful effects on reward-
761 related regions of the brain, even in the absence of impaired performance when alcohol cues are

762 employed as distracting stimuli. We also demonstrated that the increased responses in reward
763 regions are accompanied by dampened DMN activity during the presentation of alcohol cues.
764 Our results suggest that these effects are strongest among ALCw, and provide evidence for
765 dimorphic patterns of responses to alcohol cues between ALCm and ALCw.

766

767 **Acknowledgements**

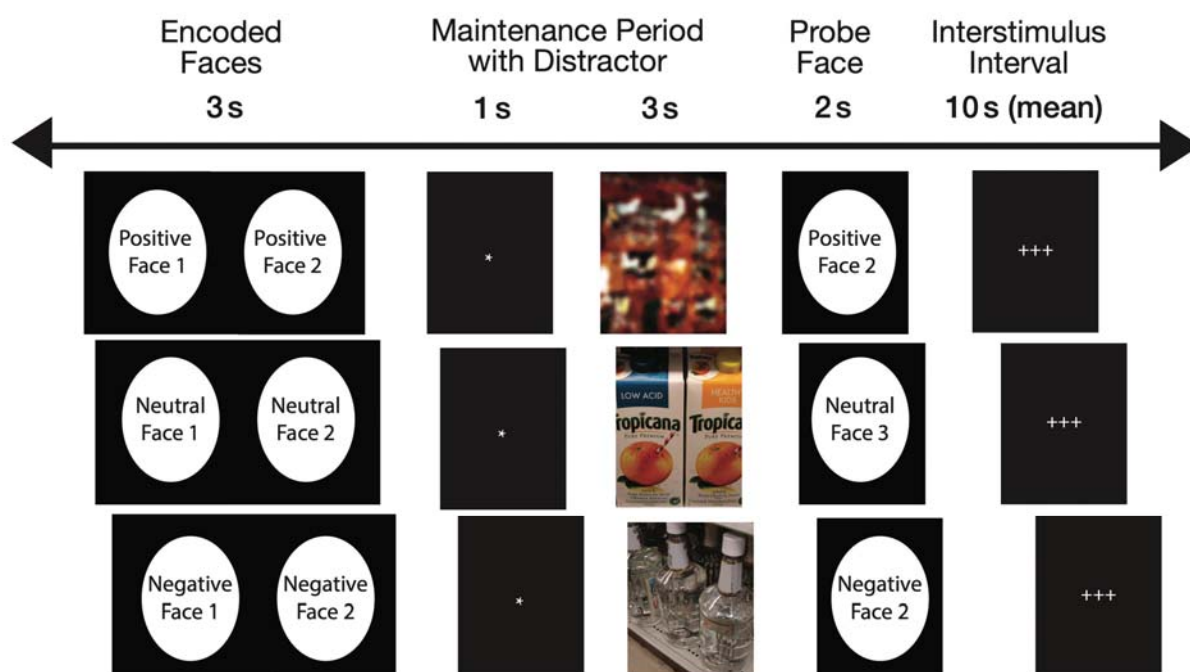
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785 or the United States Government.

786

787 **Figures**

788



789

790 **Figure 1. Task presented during functional neuroimaging**

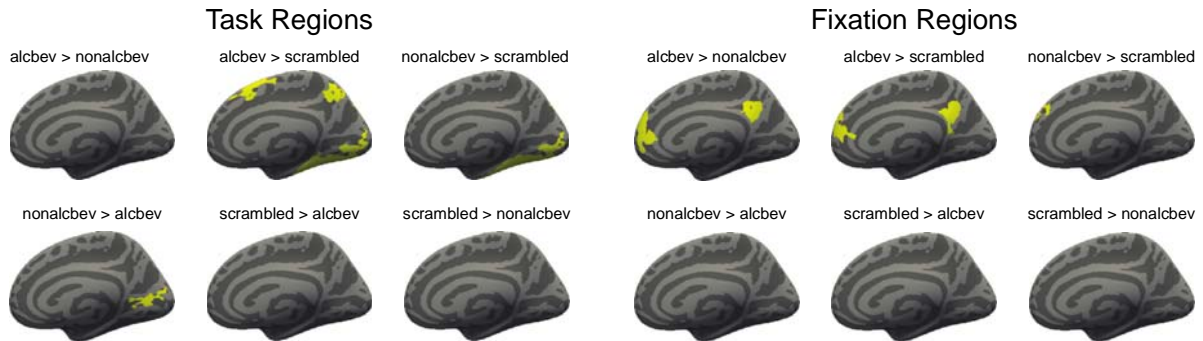
791 Two faces were presented simultaneously for three seconds, followed by an asterisk, a
792 distractor was presented for three seconds. The probe face immediately followed, during which the subjects had
793 been trained to respond with a button press with either their index or middle finger to indicate whether the probe
794 face matched the encoded face. Three crosses served as the inter-trial interval, which lasted from 2 to 30 seconds
795 (mean 10 seconds). A total of 162 trials were presented. While the faces in this figure have been blurred to mask the
796 identities of the individuals, the research participants saw the original unblurred photographs.

797

A. Fixation Masking



B. Distractor Masking



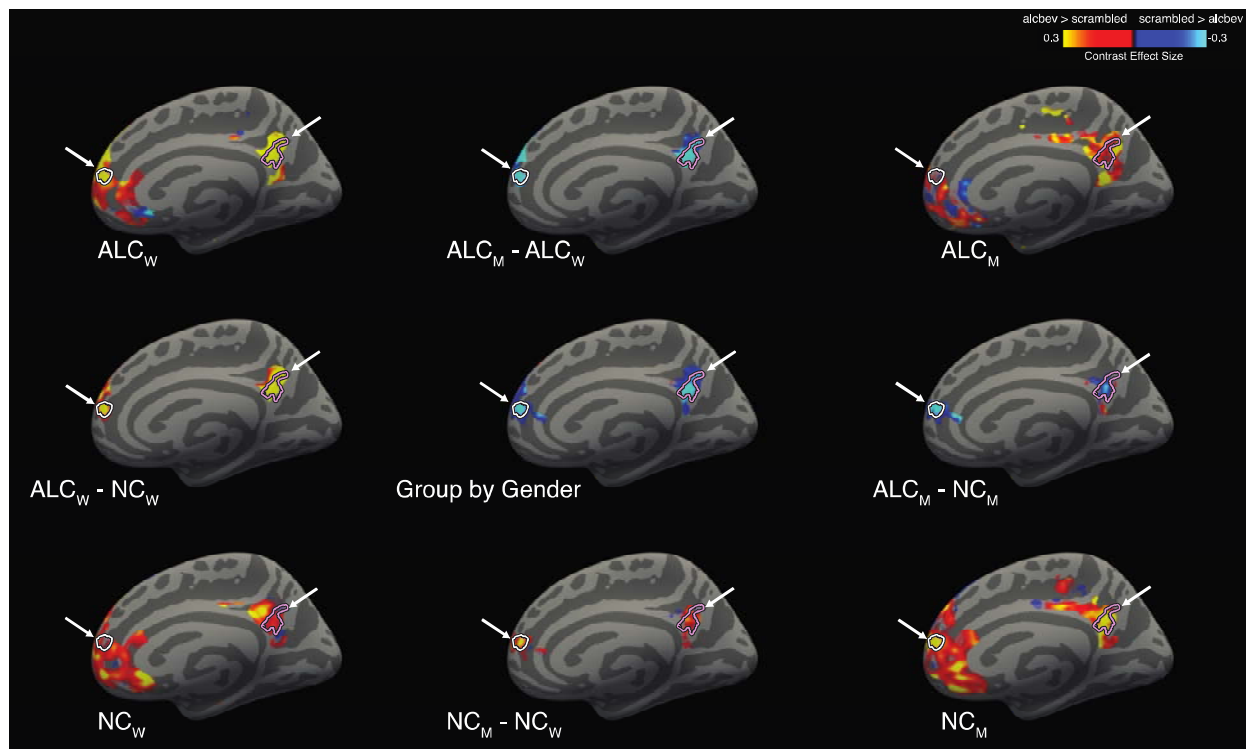
798

799 **Figure 2. Analyses conducted with masked fMRI data for cortex**

800 The top set of brains represents analyses conducted for cortical regions in which network masking (for task and
801 fixation-regions) were performed. The bottom set of brains represents analyses conducted for cortical regions in
802 which distractor masking (for task and fixation-regions) were performed.

803

804



805
806 **Figure 3. Cortical clusters significant for Group-by-Gender interactions for the alcbev vs.**

807 **scrambled contrast within fixation-regions (right medial view)**

808 A significant Group-by-Gender interaction revealed several clusters (see Table A4), two of which are indicated by
809 arrows on the medial surface of the right hemisphere, with cluster outlines overlaid on contrast values between
810 alcbev and scrambled distractors. Group mean contrast values (for alcbev vs. scrambled within fixation-regions) are
811 displayed in the four brain images located in the corners of the figure, and group comparisons are indicated by
812 minus signs. Abbreviations: ALC_m = Alcoholic men; ALC_w = Alcoholic women; NC_m = Nonalcoholic men; NC_w
813 = Nonalcoholic women.

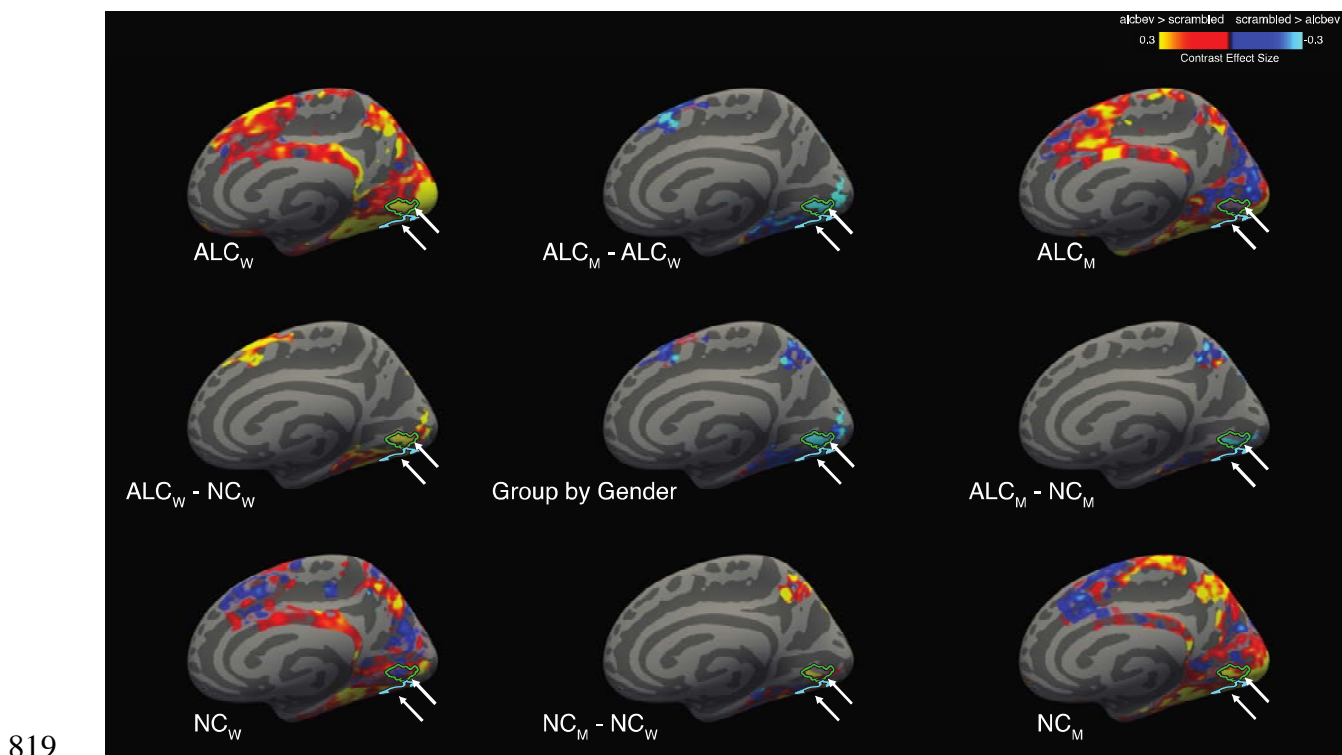
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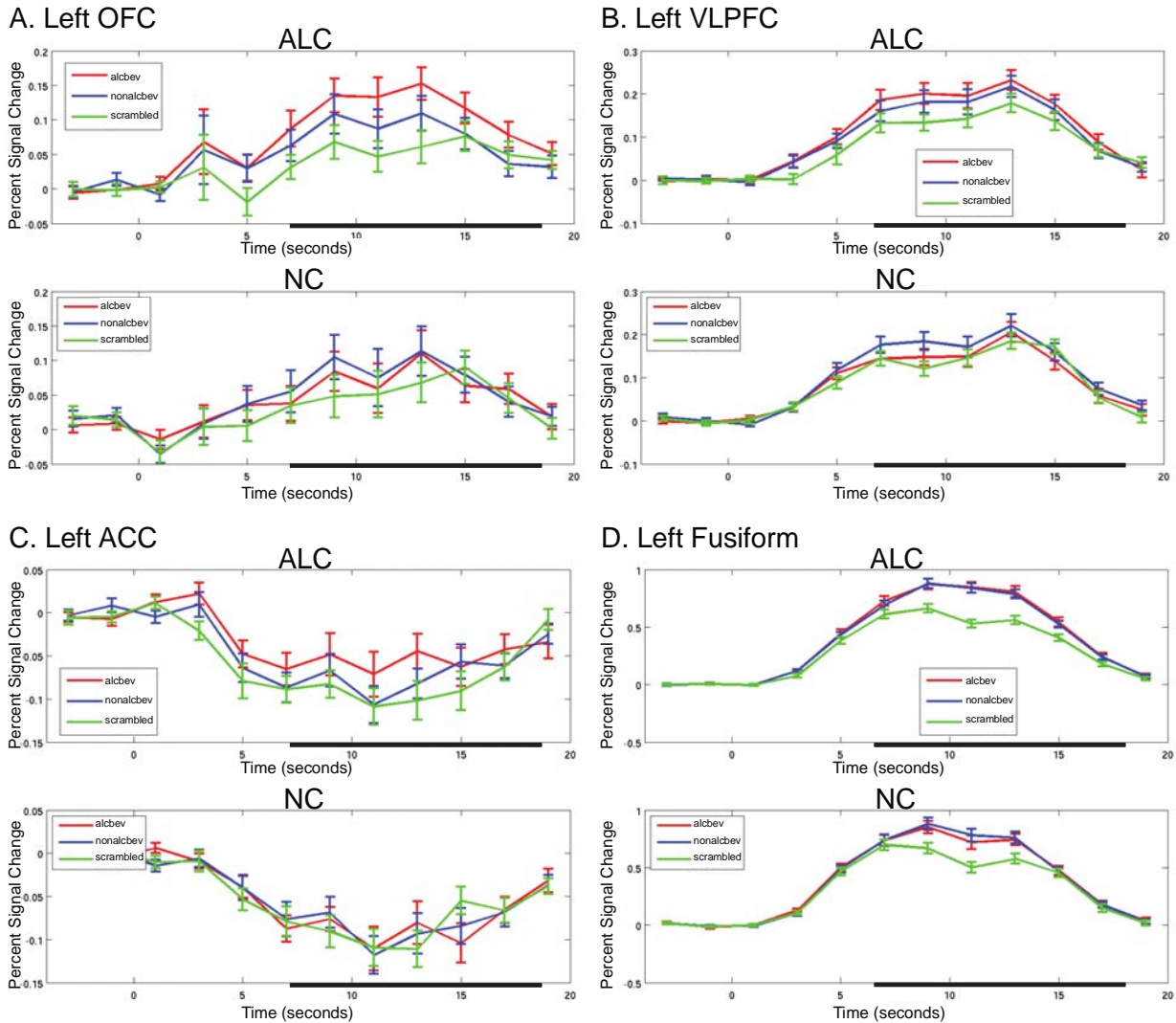


820 **Figure 4. Cortical clusters significant for Group-by-Gender interactions, for the alcbev vs.**
821 **scrambled contrast within task-regions (right medial view)**

822 A significant Group-by-Gender interaction revealed several clusters (see Table A4), two of which are indicated by
823 arrows on the medial surface of the right hemisphere, with cluster outlines overlaid on contrast values between
824 alcbev and scrambled distractors. Group mean contrast values (for alcbev vs. scrambled within task-regions) are
825 displayed in the four brain images located in the corners of the figure, and group comparisons are indicated by
826 minus signs. Abbreviations: ALC_M = Alcoholic men; ALC_W = Alcoholic women; NC_M = Nonalcoholic men; NC_W
827 = Nonalcoholic women.

828

829



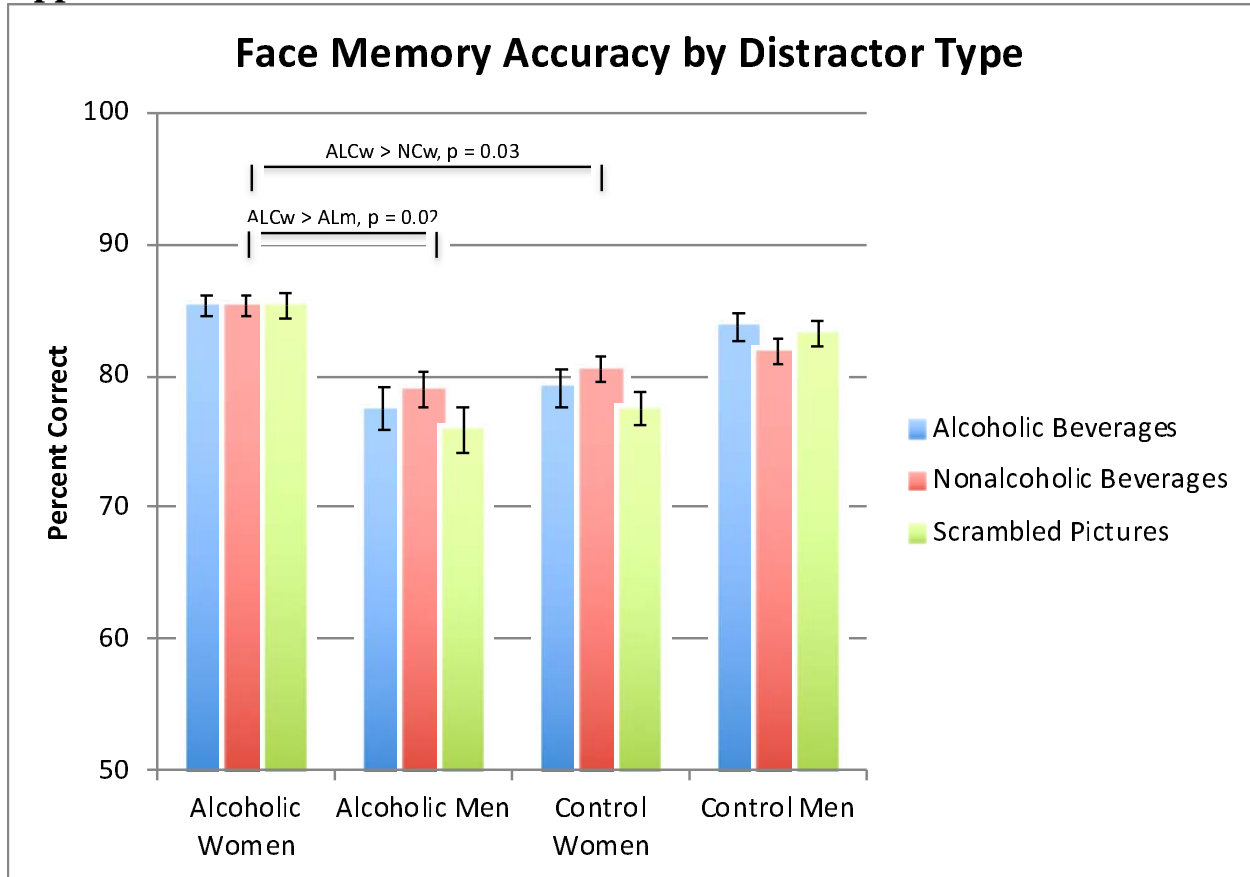
830

831 **Figure 5. ROI - Percent signal changes in regions of interest for ALC and NC participants**

832 **by distractor type**

833 The percent signal change represents brain activity during presentation of fixation and the task stimuli. Error bars
834 represent the standard error of the mean. Time zero was set to the onset of the encoded faces, and signal zero was set
835 to the average signal for the three initial time points (two pre-trial and one post-trial onset). The analysis window
836 used to examine the distractor was 6 to 16 seconds following trial onset (2 to 12 seconds after distractor onset), as
837 indicated by the thick line on the x axis. Abbreviations: OFC = orbitofrontal cortex; VLPFC = ventrolateral
838 prefrontal cortex; ACC = anterior cingulate cortex. The ACC (Panel C) is part of the anterior hub within the
839 fixation-regions. The remaining areas are primarily task-regions.

840 **Appendix**



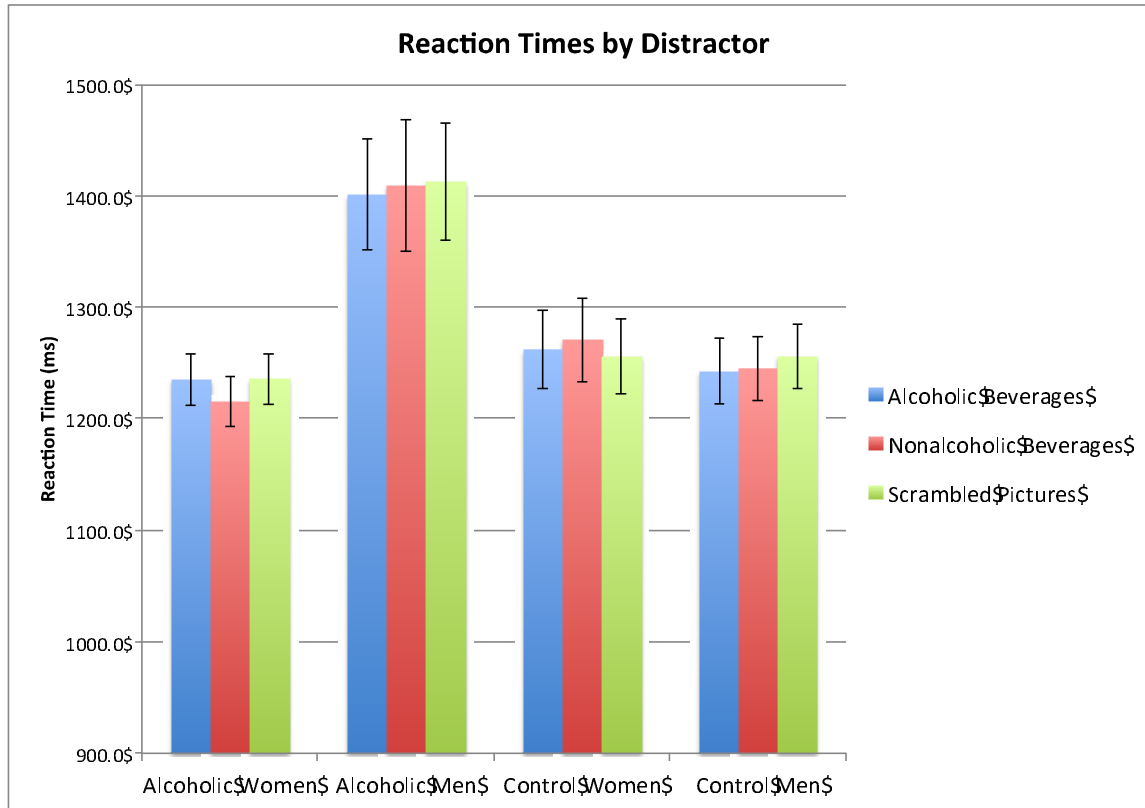
841

842 **Figure A1. Group and gender comparisons in percent correct responses to the probe face**

843 A significant Group-by-Gender interaction showed that face memory accuracy was significantly higher for the
844 Alcoholic Women than the Alcoholic Men, a gender difference that was greater than the one observed for the NC
845 group. Alcoholic Women also had higher accuracy than Control Women. (Also see Table A1.) There was no
846 significant effect of Distractor type on performance accuracy. Error bars represent standard error of the mean.

847

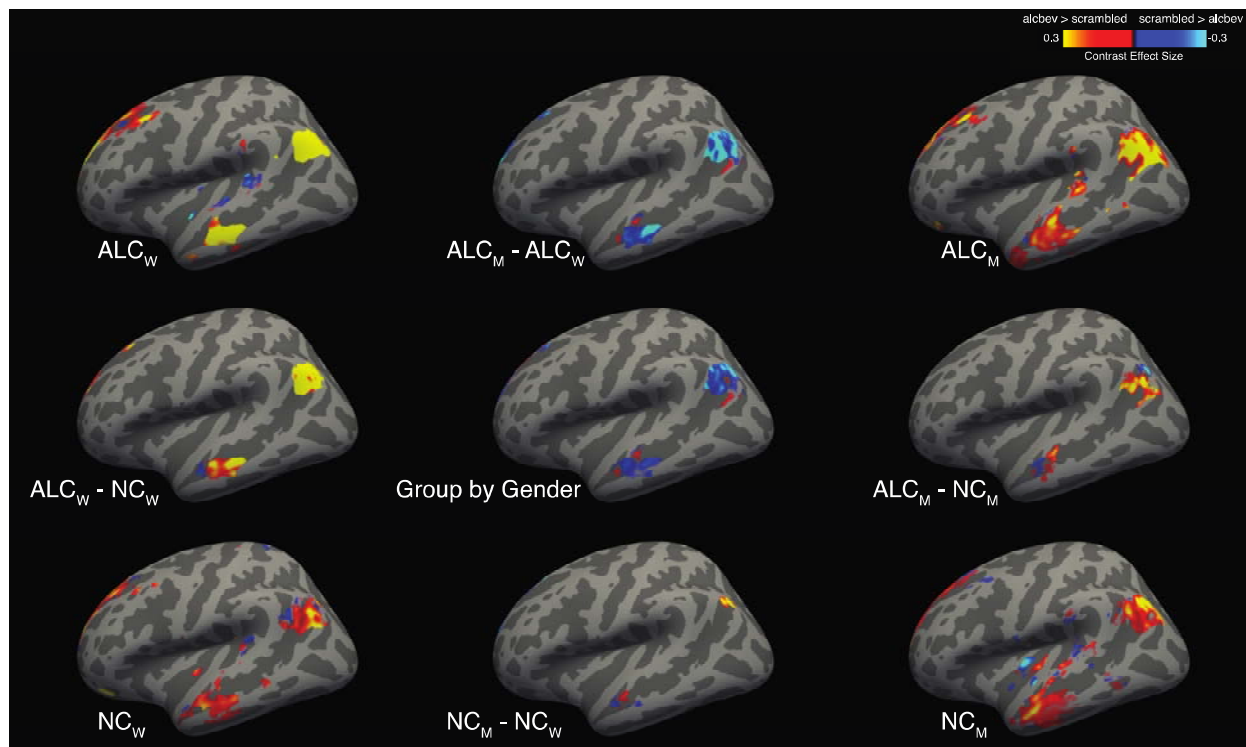
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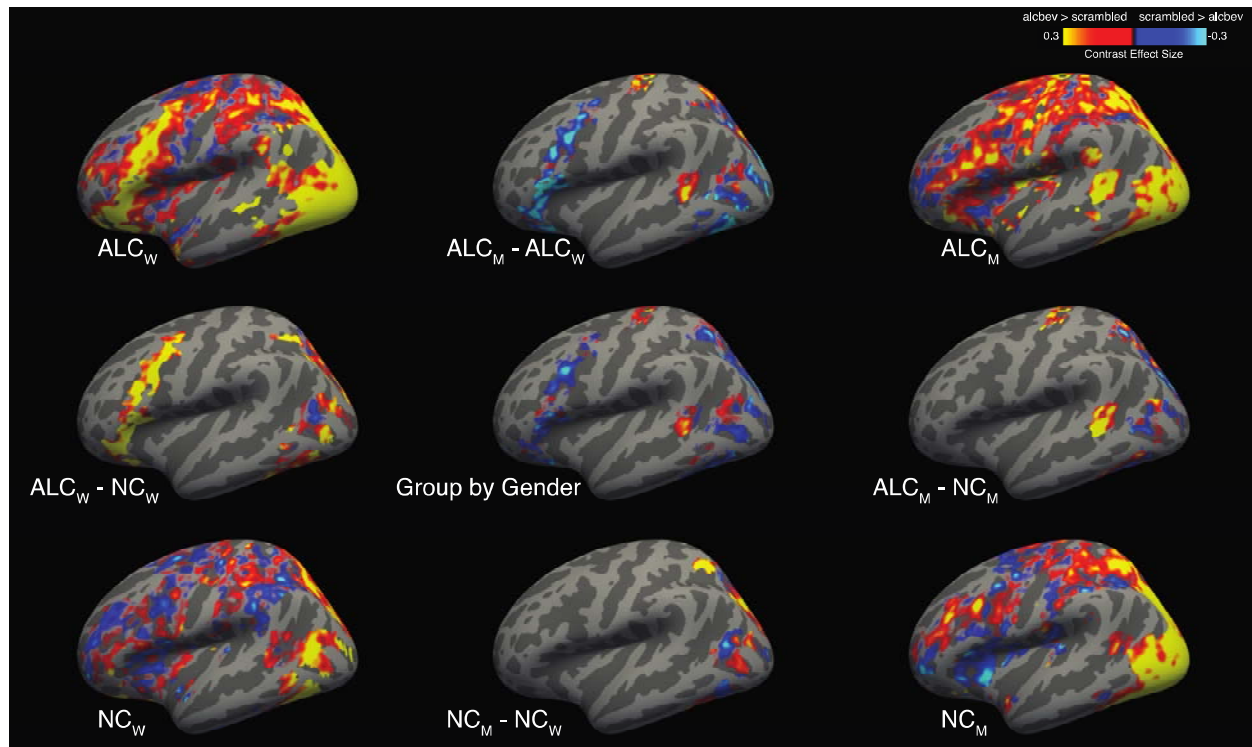
849

850 **Figure A2. Face memory reaction times: group and gender comparisons in reaction times**
851 **to the probe face as a function of the distractor stimuli**

852 Reaction times (in milliseconds) are shown for correct trials sorted by conditions and groups. (Also see Table A2.)
853 Participants did not vary significantly by Group or Gender on overall reaction times. There was no significant effect
854 of Distractor type on reaction time, nor did reaction time performance by Distractor type significantly vary by Group
855 or Gender. Error bars represent standard error of the mean.
856



857
858 **Figure A3. Cortical activation maps for the alcbev vs. scrambled contrast within fixation-**
859 **regions (left lateral view)**
860 A significant Group-by-Gender interaction revealed several clusters (see Figure 3 and Table A4), although no
861 clusters with significant interactions were found on the left lateral surface. Group mean contrast values (for alcbev
862 vs. scrambled within fixation-regions) are displayed in the four brain images located in the corners of the figure, and
863 group comparisons are indicated by minus signs. Abbreviations: ALC_M = Alcoholic men; ALC_W = Alcoholic
864 women; NC_M = Nonalcoholic men; NC_W = Nonalcoholic women.
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Figure A4. Cortical activation maps for the alcbev vs. scrambled contrast within task-regions (left lateral view)

A significant Group-by-Gender interaction revealed several clusters (see Figure 4 and Table A4), although none are visible on the left lateral view. Group mean contrast values (for alcbev vs. scrambled within fixation-regions) are displayed in the four brain images located in the corners of the figure, and group comparisons are indicated by minus signs. Abbreviations: ALC_m = Alcoholic men; ALC_w = Alcoholic women; NC_m = Nonalcoholic men; NC_w = Nonalcoholic women.

876

	Percent Correct Responses Overall ^{abc}					
	ALC	ALCw	ALCm	NC	NCw	NCm
<i>Mean</i>	81.4	85.3	77.4	81.0	79.0	82.9
<i>Standard Deviation</i>	11.5	6.8	13.8	9.7	10.7	8.4
<i>Range</i>	50.0-97.5	66.0-96.3	50.0-97.5	54.9-96.9	54.9-92.6	71.0-96.9
	Percent Correct Responses by Distractor					
	ALC	ALCw	ALCm	NC	NCw	NCm
Alcoholic Beverages						
<i>Mean</i>	81.4	85.3	77.5	81.4	79.1	83.7
<i>Standard Deviation</i>	12.4	7.4	15.0	11.4	12.9	9.5
<i>Range</i>	45.8-98.1	66.7-96.3	45.8-98.1	51.9-98.1	51.9-98.1	64.8-98.1
Nonalcoholic Beverages						
<i>Mean</i>	82.1	85.3	78.9	81.1	80.5	81.8
<i>Standard Deviation</i>	10.8	7.7	12.5	9.0	9.2	9.0
<i>Range</i>	53.7-98.1	68.8-98.1	53.7-96.3	57.4-94.4	57.4-91.7	64.8-94.4
Scrambled Pictures						
<i>Mean</i>	80.6	85.3	75.9	80.4	77.5	83.2
<i>Standard Deviation</i>	13.6	8.6	16.1	11.1	12.1	9.4
<i>Range</i>	44.4-98.1	62.5-98.1	44.4-98.1	51.9-98.1	51.9-91.7	61.1-98.1
	Percent Correct Responses by Facial Emotion ^{def}					
	ALC	ALCw	ALCm	NC	NCw	NCm
Positive Faces						
<i>Mean</i>	82.4	86.8	78.1	80.7	79.4	82.0
<i>Standard Deviation</i>	12.5	9.0	14.2	10.4	11.9	8.7
<i>Range</i>	51.9-100.0	56.3-100.0	51.9-96.3	51.9-96.3	51.9-94.4	70.4-96.3
Negative Faces						
<i>Mean</i>	81.9	85.9	77.8	82.9	80.9	84.9
<i>Standard Deviation</i>	12.0	7.2	14.4	9.5	11.0	7.5
<i>Range</i>	46.3-98.1	68.8-98.1	46.3-98.1	53.7-98.1	53.7-94.4	72.2-98.1
Neutral Faces						
<i>Mean</i>	79.8	83.2	76.4	79.3	76.7	81.9
<i>Standard Deviation</i>	11.8	7.5	14.3	11.2	11.1	10.9
<i>Range</i>	51.9-98.1	62.5-92.6	51.9-98.1	50.0-96.3	50.0-92.6	63.0-96.3

877 **Table A1. Behavioral task percent correct responses**

878 Scores for accuracy are provided for overall performance, distractor type, and facial emotion. ^aGroup x Gender;
 879 ^bAlcoholic Women > Alcoholic Men; ^cAlcoholic Women > Control Women; ^dEmotion main effect; ^ePositive Faces
 880 > Neutral Faces; ^fNegative Faces > Neutral Faces; all $p < 0.5$. Abbreviations: ALCw = Alcoholic Women; ALCm =
 881 Alcoholic Men; NCw = Nonalcoholic Control Women; NCm = Nonalcoholic Control Men.
 882

883

	ALC n = 42	NC n = 42	ALCw n = 21	ALCm n = 21	NCw n = 21	NCm n = 21
All Trials (ms)						
mean	1374.0	1302.9	1263.4	1484.6	1319.3	1286.5
standard deviation	418.2	300.0	213.0	536.1	337.2	265.0
range	896.6 - 2720.8	799.6 - 2164.9	896.6 - 1699.5	922.8 - 2720.8	931.2 - 2164.9	799.6 - 1812.7
Correct Trials (ms)						
mean	1317.6	1254.9	1229.4	1405.9	1263.1	1246.7
standard deviation	377.0	288.1	207.9	481.5	321.1	258.7
range	889.7 - 2454.1	784.2 - 2129.2	889.7 - 1649.3	912.4 - 2454.1	909.0 - 2129.2	784.2 - 1795.1
Incorrect Trials (ms)						
mean	1686.2	1564.2	1532.4	1840.0	1591.0	1537.5
standard deviation	538.2	328.2	285.2	680.3	376.8	278.1
range	1079.8 - 3883.9	1064.2 - 2480.1	1160.8 - 2374.8	1079.8 - 3883.9	1064.2 - 2480.1	1097.1 - 1939.1
	ALC	NC	ALCw	ALCm	NCw	NCm
Alcoholic Beverages (ms)						
mean	1318.3	1252.2	1235.4	1401.1	1261.7	1242.7
standard deviation	360.9	292.1	216.4	453.6	320.2	268.6
range	866.2 - 2367.9	765.7 - 2101.9	866.2 - 1578.8	926.1 - 2367.9	906.8 - 2101.9	765.7 - 1837.5
Nonalcoholic Beverages (ms)						
mean	1312.4	1257.5	1215.5	1409.3	1270.6	1244.5
standard deviation	419.1	304.9	208.2	545.0	346.9	264.4
range	886.8 - 2682.0	779.7 - 2274.0	886.8 - 1686.6	902.8 - 2682.0	910.8 - 2274.0	779.7 - 1894.5
Scrambled Pictures (ms)						
mean	1324.2	1255.9	1235.7	1412.7	1255.8	1256.0
standard deviation	378.8	281.8	213.1	482.0	306.5	262.5
range	888.7 - 2678.9	806.6 - 2004.1	914.9 - 1686.1	888.7 - 2678.9	882.4 - 2004.1	806.6 - 1825.8
	ALC	NC	ALCw	ALCm	NCw	NCm
Positive Faces (ms)						
mean	1290.5	1241.2	1227.9	1353.1	1238.4	1244.0
standard deviation	347.2	279.5	229.3	431.6	306.7	257.0
range	867.7 - 2608.6	789.2 - 2015.1	867.7 - 1617.1	894.3 - 2608.6	870.0 - 2015.1	789.2 - 1871.9
Negative Faces (ms)						
mean	1303.9	1251.2	1225.7	1382.0	1264.3	1238.0
standard deviation	322.5	294.0	186.2	407.2	323.2	269.1
range	900.0 - 2218.6	778.9 - 2128.5	900.0 - 1674.6	918.8 - 2218.6	889.4 - 2128.5	778.9 - 1803.4
Neutral Faces (ms)						
mean	1356.4	1272.4	1233.6	1479.2	1286.8	1258.0
standard deviation	492.4	307.0	235.3	640.3	346.8	269.4
range	857.7 - 3051.0	784.4 - 2226.0	857.7 - 1724.7	887.4 - 3051.0	875.3 - 2226.0	784.4 - 1706.6
	ALC	NC	ALCw	ALCm	NCw	NCm
Female Faces (ms)						
mean	1321.8	1272.3	1237.9	1405.7	1275.2	1269.4
standard deviation	369.4	288.7	206.9	471.3	311.5	271.8
range	903.8 - 2648.9	812.7 - 2089.0	903.8 - 1692.7	930.6 - 2648.9	919.7 - 2089.0	812.7 - 1830.5
Male Faces (ms)						
mean	1314.0	1237.0	1220.4	1407.6	1249.7	1224.3
standard deviation	403.4	292.6	212.4	519.7	332.7	254.0
range	872.0 - 2797.2	756.1 - 2159.7	875.7 - 1605.9	872.0 - 2797.2	880.1 - 2159.7	756.1 - 1826.1

884 **Table A2. Reaction times**

885 Group reaction times in milliseconds are provided for distractor type, facial emotion, and face gender. Footnotes
886 indicate significant differences, all $p < 0.5$: ^aGroup x Gender interaction; ^bAlcoholic Women > Alcoholic Men;
887 ^cAlcoholic Women > Control Women; ^dEmotion main effect; ^ePositive Faces > Neutral Faces; ^fNegative Faces >
888 Neutral Faces. Abbreviations: ALCw = Alcoholic Women; ALCm = Alcoholic Men; NCw = Nonalcoholic Control
889 Women; NCm = Nonalcoholic Control Men.

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Group	Fixation Masking	Contrast	Annotation	HemiMax	VtxMax	Size (mm ²)	MNLX	MNIY	MNIZ	CWP	CWPLow	CWPHI	NVtxs	
ALCw	fixation-regions	alcbv > nonalcbv	inferioparietal	L	5.777	78109	894.36	-46.9	-56.2	24.6	0.0003	0	0.0006	1808
ALCw	fixation-regions	alcbv > nonalcbv	superiorfrontal	L	5.198	117174	2021.3	-7.3	50.7	20.6	0.0003	0	0.0006	3312
ALCw	fixation-regions	alcbv > nonalcbv	precuneus	L	4.279	104685	1114.58	-6.4	-64	36.3	0.0003	0	0.0006	2313
ALCw	fixation-regions	alcbv > nonalcbv	middletemporal	L	3.397	132409	372.86	-57.9	-28.2	-12.3	0.0006	0	0.0012	643
ALCw	fixation-regions	alcbv > nonalcbv	precuneus	R	5.031	78184	343.04	8.9	-53.5	21.9	0.0006	0	0.0012	905
ALCw	fixation-regions	alcbv > nonalcbv	superiorfrontal	R	3.007	33332	470.55	7.4	44.5	26.4	0.0003	0	0.0006	773
ALCw	fixation-regions	alcbv > nonalcbv	middletemporal	R	2.388	149193	390.07	57.3	-28.2	-12.1	0.0003	0	0.0006	583
NCm	fixation-regions	alcbv > nonalcbv	precuneus	L	2.001	28044	372.78	-5.8	-61.1	26	0.0003	0	0.0006	722
NCm	fixation-regions	alcbv > nonalcbv	inferioparietal	R	2.093	87534	353.25	48	-63.2	30.4	0.0003	0	0.0006	646
NCw	fixation-regions	alcbv > nonalcbv	rostralanteriorcingulate	L	3.853	72938	1014.62	-5.7	40.1	-1	0.0003	0	0.0006	1732
NCw	fixation-regions	alcbv > nonalcbv	precuneus	L	3.518	88451	552.66	-6.9	-55	16.2	0.0003	0	0.0006	1155
NCw	fixation-regions	alcbv > nonalcbv	superiorfrontal	L	3.043	106164	573.38	-7.2	53.9	28.3	0.0003	0	0.0006	853
NCw	fixation-regions	alcbv > nonalcbv	superiorfrontal	L	2.719	37125	231.3	-13.6	43.2	41.7	0.01344	0.01106	0.01611	411
NCw	fixation-regions	alcbv > nonalcbv	superiorfrontal	R	3.812	154767	425.34	11.2	50.9	9.2	0.0003	0	0.0006	716
NCw	fixation-regions	alcbv > nonalcbv	superiorfrontal	R	2.997	141183	288	9.1	53.1	23.9	0.0006	0	0.0012	467
NCw	fixation-regions	alcbv > nonalcbv	precuneus	R	2.381	20851	168.89	12.5	-44.6	37.9	0.03762	0.03352	0.04171	460
ALCm	fixation-regions	alcbv > scrambled	superiortemporal	L	3.628	127514	287.34	-52.7	-19	-6	0.02056	0.0176	0.02381	534
ALCm	fixation-regions	alcbv > scrambled	inferioparietal	L	3.532	77987	597.66	-39.4	-65.2	28.3	0.0003	0	0.0006	1239
ALCm	fixation-regions	alcbv > scrambled	precuneus	L	3.011	42213	1099.78	-4.6	-65.4	30.8	0.0003	0	0.0006	2316
ALCm	fixation-regions	alcbv > scrambled	temporalpole	R	3.202	75073	255.04	36.1	15.1	-37.4	0.00389	0.0027	0.00539	399
ALCm	fixation-regions	alcbv > scrambled	middletemporal	R	2.184	32116	246.83	55.8	-14	-19.7	0.00479	0.0033	0.00629	358
ALCw	fixation-regions	alcbv > scrambled	superiorfrontal	L	6.192	119696	1479.43	-9	45	32.5	0.0003	0	0.0006	2382
ALCw	fixation-regions	alcbv > scrambled	isthmuscingulate	L	4.52	21771	1599.1	-4.6	-46.8	28.5	0.0003	0	0.0006	3485
ALCw	fixation-regions	alcbv > scrambled	inferioparietal	L	3.772	8342	1007.44	-46.3	-55.6	24.1	0.0003	0	0.0006	1999
ALCw	fixation-regions	alcbv > scrambled	medialorbitofrontal	L	3.625	141106	792.29	-10.2	46.2	-9.5	0.0003	0	0.0006	1321
ALCw	fixation-regions	alcbv > scrambled	middletemporal	L	3.4	132407	461.02	-57.4	-28.8	-12.1	0.0006	0	0.0012	831
ALCw	fixation-regions	alcbv > scrambled	precuneus	R	4.528	147039	407.44	6	-56.9	22.3	0.0003	0	0.0006	1063
ALCw	fixation-regions	alcbv > scrambled	rostralmiddlefrontal	R	2.928	77385	752.89	18.2	52.8	24.8	0.0003	0	0.0006	1197
ALCw	fixation-regions	alcbv > scrambled	superiorfrontal	R	2.644	116693	213.6	7.6	40.8	48.1	0.01937	0.01641	0.02233	351
NCm	fixation-regions	alcbv > scrambled	isthmuscingulate	L	4.044	159377	1127.18	-7.7	-52	21.5	0.0003	0	0.0006	2355
NCm	fixation-regions	alcbv > scrambled	middletemporal	L	3.081	46308	253.13	-57.3	-4.8	-25.2	0.02056	0.0176	0.02381	442
NCm	fixation-regions	alcbv > scrambled	medialorbitofrontal	L	2.523	119804	386.08	-7.7	57.4	-7.9	0.0006	0	0.0012	508
NCm	fixation-regions	alcbv > scrambled	superiorfrontal	L	2.157	34872	247.83	-9.7	53.4	17	0.0241	0.02085	0.02764	349
NCm	fixation-regions	alcbv > scrambled	inferioparietal	L	2.069	117757	286.31	-34.4	-81.3	30	0.00987	0.00778	0.01195	501
NCm	fixation-regions	alcbv > scrambled	inferioparietal	R	3.908	130241	606.24	46.4	-53.3	29.1	0.0003	0	0.0006	1136
NCm	fixation-regions	alcbv > scrambled	superiorfrontal	R	3.772	154660	398.31	9.2	56.8	18	0.0006	0	0.0012	677
NCm	fixation-regions	alcbv > scrambled	isthmuscingulate	R	2.376	85932	344.91	6.8	-49.7	13.4	0.0024	0.0015	0.0036	887
NCm	fixation-regions	alcbv > scrambled	superiorfrontal	R	2.322	18118	261.88	16.4	54.6	19.9	0.01165	0.00927	0.01403	332
NCw	fixation-regions	alcbv > scrambled	superiorfrontal	L	3.775	145688	785.15	-9.1	60.9	21	0.0003	0	0.0006	1299
NCw	fixation-regions	alcbv > scrambled	medialorbitofrontal	L	3.35	98461	869.42	-9.6	51.2	-4.8	0.0003	0	0.0006	1367
NCw	fixation-regions	alcbv > scrambled	middletemporal	L	2.379	13182	203.24	-51.4	-12.3	-20.5	0.04171	0.03733	0.04607	350
ALCm	fixation-regions	nonalcbv > scrambled	superiortemporal	L	3.138	161045	299.84	-48.8	-10.7	-17.9	0.01225	0.00987	0.01463	585
ALCw	fixation-regions	nonalcbv > scrambled	rostralmiddlefrontal	L	3.585	82490	424.57	-18.9	43.9	33.7	0.0003	0	0.0006	719
ALCw	fixation-regions	nonalcbv > scrambled	superiorfrontal	R	2.628	35019	244.79	14.4	53.7	26.1	0.00867	0.00659	0.01076	393
NCm	fixation-regions	nonalcbv > scrambled	superiorfrontal	R	3.123	149679	531.99	10.9	44.1	42.5	0.0003	0	0.0006	861
NCm	fixation-regions	nonalcbv > scrambled	caudalmiddlefrontal	R	2.592	63876	228.53	32	25.7	44.4	0.03762	0.03352	0.04171	420
ALCm	task-regions	alcbv > nonalcbv	precuneus	L	3.84	30022	820.45	-9.8	-74.1	42.2	0.0003	0	0.0006	1681
ALCm	task-regions	alcbv > nonalcbv	inferioparietal	L	3.068	156958	724.95	-46.8	-63.5	10.3	0.0009	0.0003	0.0015	1254
ALCm	task-regions	alcbv > nonalcbv	lateraloccipital	R	2.796	46455	556.39	41.8	-68.3	-4.7	0.0176	0.01463	0.02056	770
ALCw	task-regions	alcbv > nonalcbv	fusiform	L	4.553	127987	3039.55	-41.4	-52.4	-18.5	0.0003	0	0.0006	5083
ALCw	task-regions	alcbv > nonalcbv	lateralorbitofrontal	L	3.917	9114	696	-32.3	25	-18.9	0.00509	0.0036	0.00659	1456
ALCw	task-regions	alcbv > nonalcbv	parsopercularis	L	3.709	110686	543.82	-46.6	22.6	7.6	0.03	0.02617	0.03381	1090
ALCw	task-regions	alcbv > nonalcbv	inferioparietal	L	3.231	29327	517.43	-44.1	-69.1	20.8	0.04054	0.03616	0.04491	881
ALCw	task-regions	alcbv > nonalcbv	inferioparietal	R	2.89	158246	972.39	42.5	-64.4	7.1	0.0003	0	0.0006	1681
NCw	task-regions	alcbv > nonalcbv	superioparietal	L	2.749	100056	696.49	-21.3	-56.6	62.3	0.0036	0.0024	0.00509	1504
ALCm	task-regions	alcbv > scrambled	lateraloccipital	L	6.82	112623	9254.88	-23.5	-93.1	1.2	0.0003	0	0.0006	14918
ALCm	task-regions	alcbv > scrambled	precentral	L	5.097	102385	1154.47	-27.7	-22.4	62.9	0.0003	0	0.0006	2780
ALCm	task-regions	alcbv > scrambled	bankssts	L	3.981	86601	489.82	-50.3	-43.9	-0.6	0.03146	0.02764	0.03528	1124
ALCm	task-regions	alcbv > scrambled	lateraloccipital	R	5.32	129176	5250.06	25.7	-97.9	-2	0.0003	0	0.0006	7456
ALCm	task-regions	alcbv > scrambled	precentral	R	2.656	72522	782.86	42.6	-11.6	29.6	0.0009	0.0003	0.0015	1824
ALCw	task-regions	alcbv > scrambled	fusiform	L	6.095	34311	13105.37	-29.1	-78.2	-9	0.0003	0	0.0006	20562
ALCw	task-regions	alcbv > scrambled	isthmuscingulate	L	4.555	57611	563.79	-7.7	-42.1	26.1	0.02587	0.02233	0.02941	1660
ALCw	task-regions	alcbv > scrambled	parsopercularis	L	4.416	20526	2644.35	-49.9	21.3	8.8	0.0003	0	0.0006	4925
ALCw	task-regions	alcbv > scrambled	superiorfrontal	L	3.915	133846	522.69	-6.6	17.8	61.3	0.03937	0.03498	0.04375	926
ALCw	task-regions	alcbv > scrambled	lateraloccipital	R	8.832	119142	12539.17	28.1	-96.8	-1.5	0.0003	0	0.0006	19287
ALCw	task-regions	alcbv > scrambled	superiorfrontal	R	3.963	47146	785.28	7.9	18.3	50.6	0.003	0.0018	0.00419	1569
ALCw	task-regions	alcbv > scrambled	lateralorbitofrontal	R	3.159	37696	1035.15	39.4	30.1	-13	0.0003	0	0.0006	1916
ALCw	task-regions	alcbv > scrambled	rostralmiddlefrontal	R	2.655	37107	1604.06	40	25	34.3	0.0003	0	0.0006	2901
NCm	task-regions	alcbv > scrambled	lateraloccipital	L	6.805	122808	11030.59	-15.2	-95.6	-12.9	0.0003	0	0.0006	17180
NCm	task-regions	alcbv > scrambled	fusiform	R	6.25	92502	10153.11	35.9	-72.4	-12.4	0.0003	0	0.0006	15436
NCm	task-regions	alcbv > scrambled	precuneus	R	2.429	98061	571.75	10.4	-53.3	44.6	0.01017	0.00808	0.01255	1490
NCw	task-regions	alcbv > scrambled	fusiform	L	4.853	48274	2961.14	-29.9	-63.8	-13.1	0.0003	0	0.0006	4221
NCw	task-regions	alcbv > scrambled	inferioparietal	L	3.525	45896	469.12	-43.9	-64.9	9	0.02292	0.01967	0.02617	941
NCw	task-regions	alcbv > scrambled	superioparietal	L	2.819	157385	433.04	-24.2	-63.1	49.2	0.04083	0.03645	0.0452	920
NCw	task-regions	alcbv > scrambled	superioparietal	R	2.682	87111	609.56	-25.6	-80.9	12.8	0.0018	0.0009	0.0027	1021
NCw	task-regions	alcbv > scrambled	lateraloccipital	R	6.04	90488	1846.73	25.4	-89.2	-9.5	0.0003	0	0.0006	3154
NCw	task-regions	alcbv > scrambled	lateraloccipital	R	3.065	114637	624.55	44.2	-71.3	-8	0.0009	0.0003	0.0015	881
NCw	task-regions	alcbv > scrambled	superioparietal	R	2.97	157814	450.45	31.1	-73.7	17.1	0.02764	0.0241	0.0317	806
ALCm	task-regions	nonalcbv > alcbv	pericalcarine	L	-3.202	120908	591.21	-9.1	-86.2	-1	0.01225	0.00987	0.01463	837
ALCm	task-regions	nonalcbv > alcbv	pericalcarine	R	-1.915	43525	692.03	17.9	-69.6	10.6	0.003	0.0018	0.00419	1116
NCm	task-regions	nonalcbv > alcbv	lateraloccipital	L	-2.977	38531	778.52	-37.6	-85.9	-1.1	0.0006	0	0.0012	1036
NCm	task-regions	nonalcbv > alcbv	insula	L	-2.786	96569	492.26	-32.9	9.5	1.4	0.03352	0.0297	0.03762	1158
NCm	task-regions	nonalcbv > alcbv	superiorfrontal	L	-2.596	67709	754.6	-9.5	6.9					

NCm	task-regions	nonalbev > scrambled	caudalmiddlefrontal	R	3.904	12394	494.97	38	3.2	38.1	0.03146	0.02764	0.03528	902
NCm	task-regions	nonalbev > scrambled	postcentral	R	3.355	133589	467.15	38.7	-31.1	47.5	0.04171	0.03733	0.04607	1096
NCm	task-regions	nonalbev > scrambled	parsoptercularis	R	2.974	124506	913.39	50.3	14.1	7.6	0.0003	0	0.0006	1651
NCw	task-regions	nonalbev > scrambled	inferiortemporal	L	5.321	90682	2566.11	-44.4	-56.4	-7.1	0.0003	0	0.0006	3820
NCw	task-regions	nonalbev > scrambled	superiorparietal	L	3.983	157473	694.61	-22.7	-63.1	31.1	0.0009	0.0003	0.0015	1415
NCw	task-regions	nonalbev > scrambled	lateraloccipital	R	6.176	161836	3067.24	26.1	-88.5	-10.5	0.0003	0	0.0006	5033
NCw	task-regions	nonalbev > scrambled	superiorparietal	R	4.612	135644	954.67	26.3	-77.1	19.7	0.0003	0	0.0006	1801
NCw	task-regions	scrambled > nonalbev	superiorfrontal	L	-3.307	117186	558.06	-9.7	30.8	30.9	0.00479	0.0033	0.00629	1158
NCw	task-regions	scrambled > nonalbev	rostralmiddlefrontal	L	-2.669	99318	478.08	-33.2	48.8	8.7	0.01314	0.01076	0.01582	699

893 **Table A3. Cortical cluster characteristics for significant contrasts within each group**

894 Annotations (from the peak voxel location in the Desikan-Killiany atlas) are shown for each of the 99 clusters with
 895 significant distractor contrasts, calculated for each group separately. The clusters reported can be understood to span
 896 multiple functional regions (Woo *et al.*, 2014). That is, they are not limited to a single region, as reported by the
 897 maximal vertex or voxel. Abbreviations: Hemi = hemisphere; Max = maximum $-\log_{10}(p\text{-value})$ for group
 898 comparison in the cluster; VtxMax = vertex number at the maximum; Size = surface area of cluster; MNIX, MNIY,
 899 and MNIZ = Montreal Neurological Institute 305-subject template coordinates X, Y, and Z for the maximum vertex;
 900 CWP = cluster-wise p -value further corrected for the three spaces of left cortex, right cortex, and volume; CWPLow
 901 and CWPHi = 90% confidence intervals for CWP; NVtxs = number of vertices in the cluster; alcbev = alcoholic
 902 beverages; nonalbev = nonalcoholic beverages; L = left hemisphere; R = right hemisphere; bankssts = banks of the
 903 superior temporal sulcus.
 904

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Fixation Masking	Contrast	Annotation	Hemi	Max	VtxMax	Size (mm ²)	MNIX	MNIY	MNIZ	CWP	CWPLow	CWPHi	NVtxs
fixation-regions	alcbev > scrambled	superiorfrontal	L	-2.635	55177	313.89	-7.9	46.2	22.9	0.01136	0.00897	0.01374	461
fixation-regions	alcbev > scrambled	superiorfrontal	R	-3.304	146084	140.84	16.5	53.5	24.4	0.0021	0.0012	0.003	201
fixation-regions	alcbev > scrambled	superiorfrontal	R	-2.453	134468	116.29	12	47.4	13.5	0.01017	0.00808	0.01255	184
fixation-regions	alcbev > scrambled	precuneus	R	-1.444	122115	162.46	9.6	-54.5	24.9	0.0003	0	0.0006	418
fixation-regions	nonalcbev > scrambled	superiorfrontal	R	-3.422	59361	133.19	7.6	44.3	38.6	0.0003	0	0.0006	242
fixation-regions	nonalcbev > scrambled	superiorfrontal	R	-3.143	8241	206.58	16	53.9	24.6	0.0003	0	0.0006	313
fixation-regions	nonalcbev > scrambled	caudalmiddlefrontal	R	-2.747	29029	155.88	27.8	19.3	42.7	0.0003	0	0.0006	297
task-regions	alcbev > scrambled	superiorparietal	L	-1.996	64642	333.28	-22.2	-84.9	23.6	0.00927	0.00718	0.01136	479
task-regions	alcbev > scrambled	fusiform	R	-4.208	114347	1011.41	31.8	-74.4	-11.2	0.0003	0	0.0006	1562
task-regions	alcbev > scrambled	superiorparietal	R	-2.983	157893	409.83	21.3	-83.2	20.7	0.0012	0.0006	0.0021	627
task-regions	alcbev > scrambled	lingual	R	-2.804	79452	375.68	6.9	-68.3	2.4	0.0027	0.0015	0.00389	473
task-regions	alcbev > scrambled	superiorparietal	R	-2.679	93240	261.8	24.9	-60.1	48	0.03264	0.02882	0.03645	553
task-regions	nonalcbev > scrambled	superiorparietal	L	-2.534	120369	478.5	-17	-88.7	20.5	0.0003	0	0.0006	709
task-regions	nonalcbev > scrambled	lateraloccipital	R	-3.465	132542	658.32	29.9	-85.6	-12.5	0.0003	0	0.0006	985
task-regions	nonalcbev > scrambled	superiorparietal	R	-2.61	130192	242.3	19.9	-79.4	43	0.01908	0.01611	0.02204	404
task-regions	nonalcbev > scrambled	lateraloccipital	R	-2.437	61711	238.46	21.3	-87.7	18	0.02115	0.01789	0.0244	346
task-regions	scrambled > nonalcbev	superiorfrontal	L	-3.795	4781	140.18	-13.4	32.7	24.3	0.00718	0.00539	0.00897	238
task-regions	scrambled > nonalcbev	rostralmiddlefrontal	L	-3.026	116230	173.7	-31.1	48.1	7.1	0.0012	0.0006	0.0021	258
task-regions	scrambled > nonalcbev	superiorfrontal	L	-1.97	153483	148	-12	18.5	36.9	0.00449	0.003	0.00599	327
task-regions	scrambled > nonalcbev	rostralmiddlefrontal	L	-1.861	36306	136.94	-36.8	31.1	29.6	0.00897	0.00688	0.01106	200
task-regions	nonalcbev > alcbev	superiorfrontal	L	3.14	140803	102.82	-8.9	30.4	32	0.04287	0.0385	0.04724	180
task-regions	nonalcbev > alcbev	superiorfrontal	L	2.283	110024	120.81	-12.3	17.2	36.8	0.01403	0.01136	0.01671	290

906 **Table A4. Cortical cluster characteristics for significant Group-by-Gender interactions**

907 Annotations (from the peak voxel location in the Desikan-Killiany atlas) are shown separately for each of the 22
 908 clusters with significant Group-by-Gender interactions for distractor contrasts. The clusters reported can be
 909 understood to span multiple functional regions (Woo *et al.*, 2014). That is, they are not limited to a single region, as
 910 reported by the maximal vertex or voxel. Abbreviations: Hemi = hemisphere; Max = maximum $-\log_{10}(p\text{-value})$ for
 911 group comparison in the cluster; VtxMax = vertex number at the maximum; Size = surface area of cluster; MNIX,
 912 MNIY, and MNIZ = Montreal Neurological Institute 305-subject template coordinates X, Y, and Z for the
 913 maximum vertex; CWP = cluster-wise p -value further corrected for the three spaces of left cortex, right cortex, and
 914 volume; CWPLow and CWPHi = 90% confidence intervals for CWP; NVtxs = number of vertices in the cluster;
 915 alcbev = alcoholic beverages; nonalcbev = nonalcoholic beverages; L = left hemisphere; R = right hemisphere. See
 916 Table 2 for a summary of the cluster information provided here.
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Fixation Masking	Contrast	Annotation	Hemi	Max	VtxMax	Size (mm ²)	MNIX	MNIY	MNIZ	CWP	CWPLow	CWPHi	NVtxs
fixation-regions	alcbev > scrambled	inferioparietal	L	4.631	58681	489.84	-50.5	-55	23.8	0.0003	0	0.0006	1036
fixation-regions	nonalcbev > scrambled	isthmuscingulate	L	1.92	93859	136.3	-14.5	-53.6	7.6	0.00748	0.00569	0.00927	325
task-regions	alcbev > nonalcbev	bankssts	L	3.748	1233	327.69	-50.5	-38.3	2.9	0.0003	0	0.0006	773
task-regions	alcbev > nonalcbev	lateralorbitofrontal	L	3.411	67740	392.95	-42.1	27.4	-14.3	0.0003	0	0.0006	737
task-regions	alcbev > nonalcbev	superioparietal	L	2.862	123629	420.39	-30.7	-50.7	49.5	0.0003	0	0.0006	950
task-regions	alcbev > nonalcbev	superiortemporal	R	2.818	12074	230.32	46.6	-27.1	-2.4	0.0006	0	0.0012	597
task-regions	alcbev > nonalcbev	inferioparietal	R	2.766	31474	167.47	40	-74.7	11.1	0.017	0.01403	0.01997	266
task-regions	alcbev > nonalcbev	parsorbitalis	R	2.692	27157	219.37	47.2	36.2	-10.5	0.0009	0.0003	0.0015	298
task-regions	alcbev > nonalcbev	lateraloccipital	R	2.249	56055	346.42	42.2	-72	-5.8	0.0003	0	0.0006	461
task-regions	alcbev > scrambled	superiortemporal	L	4.221	86665	439.74	-47.3	-31.5	-3.3	0.00449	0.003	0.00599	1029
task-regions	alcbev > scrambled	superiorfrontal	L	3.663	129715	522.55	-7.2	24.4	46.7	0.0015	0.0006	0.0024	919
task-regions	alcbev > scrambled	parsopercularis	L	3.155	25042	876.27	-45.5	17.6	20.3	0.0003	0	0.0006	1611
task-regions	alcbev > scrambled	parsorbitalis	L	2.208	10768	301.1	-45.3	31.4	-13.3	0.04578	0.04112	0.05043	621
task-regions	alcbev > scrambled	superiorfrontal	R	3.989	80231	427	11.6	20.7	57.1	0.0003	0	0.0006	844
task-regions	alcbev > scrambled	caudalmiddlefrontal	R	1.867	100338	259.44	38.9	7.5	55	0.03088	0.02705	0.03469	461

919 **Table A5. Cortical cluster characteristics for significant comparisons between ALC and**
 920 **NC groups.**

921 The activation levels for all contrasts were significantly greater for the ALC group than for the NC group.
 922 Annotations (from the peak voxel location in the Desikan-Killiany atlas) are shown separately for each of the 15
 923 clusters with significant group comparisons for distractor contrasts. The clusters reported can be understood to span
 924 multiple functional regions (Woo *et al.*, 2014). That is, they are not limited to a single region, as reported by the
 925 maximal vertex or voxel. Abbreviations: Hemi = hemisphere; Max = maximum $-\log_{10}(p\text{-value})$ for group
 926 comparison in the cluster; VtxMax = vertex number at the maximum; Size = surface area of cluster; MNIX, MNIY,
 927 and MNIZ = Montreal Neurological Institute 305-subject template coordinates X, Y, and Z for the maximum vertex;
 928 CWP = cluster-wise p -value further corrected for the three spaces of left cortex, right cortex, and volume; CWPLow
 929 and CWPHi = 90% confidence intervals for CWP; NVtxs = number of vertices in the cluster; alcbev = alcoholic
 930 beverages; nonalcbev = nonalcoholic beverages; L = left hemisphere; R = right hemisphere; bankssts = banks of the
 931 superior temporal sulcus.

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935 **References**

- 936 Alba-Ferrara, L., Müller-Oehring, E.M., Sullivan, E.V., Pfefferbaum, A., & Schulte, T. (2016) Brain
937 responses to emotional salience and reward in alcohol use disorder. *Brain Imaging Behav.*, **10**, 136–
938 146.
- 939 Aron, A.R., Robbins, T.W., & Poldrack, R.A. (2004) Inhibition and the right inferior frontal cortex.
940 *Trends Cogn. Sci.*, **8**, 170–177.
- 941 Avena, N.M., Rada, P., & Hoebel, B.G. (2008) Evidence for sugar addiction: behavioral and
942 neurochemical effects of intermittent, excessive sugar intake. *Neurosci. Biobehav. Rev.*, **32**, 20–39.
- 943 Beaty, R.E., Benedek, M., Silvia, P.J., & Schacter, D.L. (2016) Creative Cognition and Brain Network
944 Dynamics. *Trends Cogn. Sci.*, **20**, 87–95.
- 945 Becker, J.B., McClellan, M.L., & Reed, B.G. (2017) Sex differences, gender and addiction. *J. Neurosci.*
946 *Res.*, **95**, 136–147.
- 947 Bednarski, S.R., Zhang, S., Hong, K.-I., Sinha, R., Rounsaville, B.J., & Li, C.-S.R. (2011) Deficits in
948 default mode network activity preceding error in cocaine dependent individuals. *Drug Alcohol*
949 *Depend.*, **119**, e51–e57.
- 950 Benishek, L.A., Bieschke, K.J., Stöffelmayr, B.E., Mavis, B.E., & Humphreys, K.A. (1992) Gender
951 differences in depression and anxiety among alcoholics. *J. Subst. Abuse*, **4**, 235–245.
- 952 Bordnick, P.S., Traylor, A., Copp, H.L., Graap, K.M., Carter, B., Ferrer, M., & Walton, A.P. (2008)
953 Assessing reactivity to virtual reality alcohol based cues. *Addict. Behav.*, **33**, 743–756.
- 954 Briggs, G.G. & Nebes, R.D. (1975) Patterns of hand preference in a student population. *Cortex*, **11**, 230–
955 238.
- 956 Brighton, R., Moxham, L., & Traynor, V. (2016) Women and Alcohol Use Disorders: Factors That Lead
957 to Harm. *J. Addict. Nurs.*, **27**, 205–213.
- 958 Broyd, S.J., Demanuele, C., Debener, S., Helps, S.K., James, C.J., & Sonuga-Barke, E.J.S. (2009)

- 959 Default-mode brain dysfunction in mental disorders: a systematic review. *Neurosci. Biobehav. Rev.*,
960 **33**, 279–296.
- 961 Buckner, R.L. & DiNicola, L.M. (2019) The brain’s default network: updated anatomy, physiology and
962 evolving insights. *Nat. Rev. Neurosci.*, **20**, 593–608.
- 963 Cahalan, D., Cisin, I.H., & Crossley, H.M. (1969) American drinking practices: A national study of
964 drinking behavior and attitudes. *Monographs of the Rutgers Center of Alcohol Studies*, **6**, 260.
- 965 Carter, B.L. & Tiffany, S.T. (1999) Meta-analysis of cue-reactivity in addiction research. *Addiction*, **94**,
966 327–340.
- 967 Chanraud, S., Pitel, A.-L., Pfefferbaum, A., & Sullivan, E.V. (2011) Disruption of functional connectivity
968 of the default-mode network in alcoholism. *Cereb. Cortex*, **21**, 2272–2281.
- 969 Clapp, W.C., Rubens, M.T., & Gazzaley, A. (2010) Mechanisms of working memory disruption by
970 external interference. *Cereb. Cortex*, **20**, 859–872.
- 971 Clark, U.S., Oscar-Berman, M., Shagrin, B., & Pencina, M. (2007) Alcoholism and judgments of
972 affective stimuli. *Neuropsychology*, **21**, 346–362.
- 973 Dale, A.M. (1999) Optimal experimental design for event-related fMRI. *Hum. Brain Mapp.*, **8**, 109–114.
- 974 Dale, A.M., Fischl, B., & Sereno, M.I. (1999) Cortical surface-based analysis. I. Segmentation and
975 surface reconstruction. *Neuroimage*, **9**, 179–194.
- 976 Desikan, R.S., Ségonne, F., Fischl, B., Quinn, B.T., Dickerson, B.C., Blacker, D., Buckner, R.L., Dale,
977 A.M., Maguire, R.P., Hyman, B.T., Albert, M.S., & Killiany, R.J. (2006) An automated labeling
978 system for subdividing the human cerebral cortex on MRI scans into gyral based regions of interest.
979 *Neuroimage*, **31**, 968–980.
- 980 Destrieux, C., Fischl, B., Dale, A., & Halgren, E. (2010) Automatic parcellation of human cortical gyri
981 and sulci using standard anatomical nomenclature. *Neuroimage*, **53**, 1–15.
- 982 Dolcos, F., LaBar, K.S., & Cabeza, R. (2005) Remembering one year later: role of the amygdala and the
983 medial temporal lobe memory system in retrieving emotional memories. *Proc. Natl. Acad. Sci. U. S.*
984 *A.*, **102**, 2626–2631.

- 985 Dolcos, F. & McCarthy, G. (2006) Brain systems mediating cognitive interference by emotional
986 distraction. *J. Neurosci.*, **26**, 2072–2079.
- 987 Eklund, A., Nichols, T.E., & Knutsson, H. (2016) Cluster failure: Why fMRI inferences for spatial extent
988 have inflated false-positive rates. *Proc. Natl. Acad. Sci. U. S. A.*, **113**, 7900–7905.
- 989 Fama, R., Le Berre, A.-P., & Sullivan, E.V. (2020) Alcohol's Unique Effects on Cognition in Women: A
990 2020 (Re)view to Envision Future Research and Treatment. *Alcohol Res.*, **40**, 03.
- 991 Feldstein Ewing, S.W., Filbey, F.M., Chandler, L.D., & Hutchison, K.E. (2010) Exploring the
992 relationship between depressive and anxiety symptoms and neuronal response to alcohol cues.
993 *Alcohol. Clin. Exp. Res.*, **34**, 396–403.
- 994 Field, M. & Cox, W. (2008) Attentional bias in addictive behaviors: A review of its development, causes,
995 and consequences. *Drug and Alcohol Dependence*, **97**, 1–20.
- 996 Field, M. & Eastwood, B. (2005) Experimental manipulation of attentional bias increases the motivation
997 to drink alcohol. *Psychopharmacology* , **183**, 350–357.
- 998 Field, M., Marhe, R., & Franken, I.H.A. (2014) The clinical relevance of attentional bias in substance use
999 disorders. *CNS Spectr.*, **19**, 225–230.
- 1000 Field, M., Mogg, K., Zetteler, J., & Bradley, B.P. (2004) Attentional biases for alcohol cues in heavy and
1001 light social drinkers: the roles of initial orienting and maintained attention. *Psychopharmacology* ,
1002 **176**, 88–93.
- 1003 Field, M., Munafò, M.R., & Franken, I.H.A. (2009) A meta-analytic investigation of the relationship
1004 between attentional bias and subjective craving in substance abuse. *Psychol. Bull.*, **135**, 589–607.
- 1005 Fischl, B., Salat, D.H., Busa, E., Albert, M., Dieterich, M., Haselgrove, C., van der Kouwe, A., Killiany,
1006 R., Kennedy, D., Klaveness, S., Montillo, A., Makris, N., Rosen, B., & Dale, A.M. (2002) Whole
1007 brain segmentation: automated labeling of neuroanatomical structures in the human brain. *Neuron*,
1008 **33**, 341–355.
- 1009 Fischl, B., Sereno, M.I., Tootell, R.B.H., & Dale, A.M. (1999) High-resolution intersubject averaging and
1010 a coordinate system for the cortical surface. *Human Brain Mapping*, **8**, 272–284.

- 1011 Flannery, B.A., Volpicelli, J.R., & Pettinati, H.M. (1999) Psychometric properties of the Penn Alcohol
1012 Craving Scale. *Alcohol. Clin. Exp. Res.*, **23**, 1289–1295.
- 1013 Franken, I.H.A. (2003) Drug craving and addiction: integrating psychological and
1014 neuropsychopharmacological approaches. *Prog. Neuropsychopharmacol. Biol. Psychiatry*, **27**, 563–
1015 579.
- 1016 Fryer, S.L., Jorgensen, K.W., Yetter, E.J., Daurignac, E.C., Watson, T.D., Shanbhag, H., Krystal, J.H., &
1017 Mathalon, D.H. (2013) Differential brain response to alcohol cue distractors across stages of alcohol
1018 dependence. *Biol. Psychol.*, **92**, 282–291.
- 1019 Garber, A.K. & Lustig, R.H. (2011) Is fast food addictive? *Curr. Drug Abuse Rev.*, **4**, 146–162.
- 1020 George, M.S., Anton, R.F., Bloomer, C., Teneback, C., Drobles, D.J., Lorberbaum, J.P., Nahas, Z., &
1021 Vincent, D.J. (2001) Activation of prefrontal cortex and anterior thalamus in alcoholic subjects on
1022 exposure to alcohol-specific cues. *Arch. Gen. Psychiatry*, **58**, 345–352.
- 1023 Goldstein, R.Z. & Volkow, N.D. (2002) Drug addiction and its underlying neurobiological basis:
1024 neuroimaging evidence for the involvement of the frontal cortex. *Am. J. Psychiatry*, **159**, 1642–1652.
- 1025 Goldstein, R.Z. & Volkow, N.D. (2011) Dysfunction of the prefrontal cortex in addiction: neuroimaging
1026 findings and clinical implications. *Nature Reviews Neuroscience*, **12**, 652–669.
- 1027 Greve, D.N. & Fischl, B. (2009) Accurate and robust brain image alignment using boundary-based
1028 registration. *Neuroimage*, **48**, 63–72.
- 1029 Grüsser, S.M., Heinz, A., & Flor, H. (2000) Standardized stimuli to assess drug craving and drug memory
1030 in addicts. *J. Neural Transm.*, **107**, 715–720.
- 1031 Hamilton, M. (1960) A rating scale for depression. *J. Neurol. Neurosurg. Psychiatry*, **23**, 56–62.
- 1032 Heilbronner, S.R. & Hayden, B.Y. (2016) Dorsal anterior cingulate cortex: A bottom-up view. *Annu. Rev.*
1033 *Neurosci.*, **39**, 149–170.
- 1034 Heinz, A., Wrase, J., Kahnt, T., Beck, A., Bromand, Z., Grüsser, S.M., Kienast, T., Smolka, M.N., Flor,
1035 H., & Mann, K. (2007) Brain activation elicited by affectively positive stimuli is associated with a
1036 lower risk of relapse in detoxified alcoholic subjects. *Alcohol. Clin. Exp. Res.*, **31**, 1138–1147.

- 1037 Hoffman, L.A., Lewis, B., & Nixon, S.J. (2019) Neurophysiological and interpersonal correlates of
1038 emotional face processing in Alcohol Use Disorder. *Alcohol. Clin. Exp. Res.*, **43**.
- 1039 Holdnack, J.A. & Drozdick, L.W. (2010) CHAPTER 9 - Using WAIS-IV with WMS-IV. In Weiss, L.G.,
1040 Saklofske, D.H., Coalson, D.L., & Raiford, S.E. (eds), *WAIS-IV Clinical Use and Interpretation*.
1041 Academic Press, San Diego, pp. 237–283.
- 1042 Jha, A.P., Fabian, S.A., & Aguirre, G.K. (2004) The role of prefrontal cortex in resolving distractor
1043 interference. *Cogn. Affect. Behav. Neurosci.*, **4**, 517–527.
- 1044 Kaag, A.M., Wiers, R.W., de Vries, T.J., Pattij, T., & Goudriaan, A.E. (2019) Striatal alcohol cue-
1045 reactivity is stronger in male than female problem drinkers. *Eur. J. Neurosci.*, **50**, 2264–2273.
- 1046 Koob, G.F. & Volkow, N.D. (2010) Neurocircuitry of addiction. *Neuropsychopharmacology*, **35**, 217–
1047 238.
- 1048 Koshino, H., Minamoto, T., Ikeda, T., Osaka, M., Otsuka, Y., & Osaka, N. (2011) Anterior medial
1049 prefrontal cortex exhibits activation during task preparation but deactivation during task execution.
1050 *PLoS One*, **6**, e22909.
- 1051 Kunz, S., Beblo, T., Driessen, M., & Woermann, F. (2008) fMRI of alcohol craving after individual cues:
1052 a follow-up case report. *Neurocase*, **14**, 343–346.
- 1053 LeDoux, J.E. (1996) *The Emotional Brain: The Mysterious Underpinnings of Emotional Life*. Simon &
1054 Schuster.
- 1055 Lewis, B., Price, J.L., Garcia, C.C., & Nixon, S.J. (2019) Emotional Face Processing among Treatment-
1056 Seeking Individuals with Alcohol Use Disorders: Investigating Sex Differences and Relationships
1057 with Interpersonal Functioning. *Alcohol Alcohol*, **54**, 361–369.
- 1058 Loeber, S., Vollstädt-Klein, S., von der Goltz, C., Flor, H., Mann, K., & Kiefer, F. (2009) Attentional bias
1059 in alcohol-dependent patients: the role of chronicity and executive functioning. *Addict. Biol.*, **14**,
1060 194–203.
- 1061 Lubman, D.I. (2007) Addiction neuroscience and its relevance to clinical practice. *Drug Alcohol Rev.*, **26**,
1062 1–2.

- 1063 Luhar, R.B., Sawyer, K.S., Gravitz, Z., Ruiz, S.M., & Oscar-Berman, M. (2013) Brain volumes and
1064 neuropsychological performance are related to current smoking and alcoholism history.
1065 *Neuropsychiatr. Dis. Treat.*, **9**, 1767–1784.
- 1066 Makris, N., Oscar-Berman, M., Jaffin, S.K., Hodge, S.M., Kennedy, D.N., Caviness, V.S., Marinkovic,
1067 K., Breiter, H.C., Gasic, G.P., & Harris, G.J. (2008) Decreased volume of the brain reward system in
1068 alcoholism. *Biological Psychiatry*, **64**, 192–202.
- 1069 Mann, K., Ackermann, K., Croissant, B., Mundle, G., Nakovics, H., & Diehl, A. (2005) Neuroimaging of
1070 gender differences in alcohol dependence: Are women more vulnerable? *Alcoholism: Clinical &*
1071 *Experimental Research*, **29**, 896–901.
- 1072 Margulies, D.S., Ghosh, S.S., Goulas, A., Falkiewicz, M., Huntenburg, J.M., Langs, G., Bezgin, G.,
1073 Eickhoff, S.B., Castellanos, F.X., Petrides, M., Jefferies, E., & Smallwood, J. (2016) Situating the
1074 default-mode network along a principal gradient of macroscale cortical organization. *Proc. Natl.*
1075 *Acad. Sci. U. S. A.*, **113**, 12574–12579.
- 1076 Marinkovic, K., Oscar-Berman, M., Urban, T., O'Reilly, C.E., Howard, J.A., Sawyer, K., & Harris, G.J.
1077 (2009) Alcoholism and dampened temporal limbic activation to emotional faces. *Alcohol. Clin. Exp.*
1078 *Res.*, **33**, 1880–1892.
- 1079 Menon, V. (2011) Large-scale brain networks and psychopathology: a unifying triple network model.
1080 *Trends Cogn. Sci.*, **15**, 483–506.
- 1081 Merrill, J.E. & Read, J.P. (2010) Motivational pathways to unique types of alcohol consequences.
1082 *Psychol. Addict. Behav.*, **24**, 705–711.
- 1083 Mosher Ruiz, S., Oscar-Berman, M., Kempainen, M.I., Valmas, M.M., & Sawyer, K.S. (2017)
1084 Associations between personality and drinking motives among abstinent adult alcoholic men and
1085 women. *Alcohol Alcohol*, **52**, 496–505.
- 1086 Myrick, H., Anton, R.F., Li, X., Henderson, S., Drobles, D., Voronin, K., & George, M.S. (2004)
1087 Differential brain activity in alcoholics and social drinkers to alcohol cues: relationship to craving.
1088 *Neuropsychopharmacology*, **29**, 393–402.

- 1089 Myrick, H., Anton, R.F., Li, X., Henderson, S., Randall, P.K., & Voronin, K. (2008) Effect of naltrexone
1090 and ondansetron on alcohol cue-induced activation of the ventral striatum in alcohol-dependent
1091 people. *Arch. Gen. Psychiatry*, **65**, 466–475.
- 1092 Oscar-Berman, M., Hancock, M., Mildworf, B., Hutner, N., & Weber, D.A. (1990) Emotional perception
1093 and memory in alcoholism and aging. *Alcohol. Clin. Exp. Res.*, **14**, 383–393.
- 1094 Oscar-Berman, M. & Maleki, N. (2019) Alcohol Dementia, Wernicke’s Encephalopathy, and Korsakoff’s
1095 Syndrome. In Michael L. Alosco and Robert A. Stern (ed), *The Oxford Handbook of Adult Cognitive*
1096 *Disorders*. Oxford University Press, pp. 743–758.
- 1097 Oscar-Berman, M., Ruiz, S.M., Marinkovic, K., Valmas, M.M., Harris, G.J., & Sawyer, K.S. (2019)
1098 Brain responsivity to emotional faces differs in alcoholic men and women. *bioRxiv*, 496166.
- 1099 Oscar-Berman, M., Valmas, M.M., Sawyer, K.S., Ruiz, S.M., Luhar, R.B., & Gravitz, Z.R. (2014)
1100 Profiles of impaired, spared, and recovered neuropsychologic processes in alcoholism. *Handb. Clin.*
1101 *Neurol.*, **125**, 183–210.
- 1102 Philippot, P., Kornreich, C., Blairy, S., Baert, I., Den Dulk, A., Le Bon, O., Streel, E., Hess, U., Pelc, I., &
1103 Verbanck, P. (1999) Alcoholics’ deficits in the decoding of emotional facial expression. *Alcohol.*
1104 *Clin. Exp. Res.*, **23**, 1031–1038.
- 1105 Pourtois, G., Schwartz, S., Spiridon, M., Martuzzi, R., & Vuilleumier, P. (2009) Object representations
1106 for multiple visual categories overlap in lateral occipital and medial fusiform cortex. *Cereb. Cortex*,
1107 **19**, 1806–1819.
- 1108 Ray, S., Hanson, C., Hanson, S.J., & Bates, M.E. (2010) fMRI BOLD response in high-risk college
1109 students (Part 1): during exposure to alcohol, marijuana, polydrug and emotional picture cues.
1110 *Alcohol Alcohol*, **45**, 437–443.
- 1111 Reinhard, I., Leménager, T., Fauth-Bühler, M., Hermann, D., Hoffmann, S., Heinz, A., Kiefer, F.,
1112 Smolka, M.N., Wellek, S., Mann, K., & Vollstädt-Klein, S. (2015) A comparison of region-of-
1113 interest measures for extracting whole brain data using survival analysis in alcoholism as an
1114 example. *J. Neurosci. Methods*, **242**, 58–64.

- 1115 Rivas-Grajales, A.M., Sawyer, K.S., Karmacharya, S., Papadimitriou, G., Camprodon, J.A., Harris, G.J.,
1116 Kubicki, M., Oscar-Berman, M., & Makris, N. (2018) Sexually dimorphic structural abnormalities in
1117 major connections of the medial forebrain bundle in alcoholism. *NeuroImage: Clinical*, **19**, 98–105.
- 1118 Robins, L.N., Cottler, L.B., Bucholz, K.K., Compton, W.M., North, C.S., & Rourke, K. (2000)
1119 *Computerized Diagnostic Interview Schedule for the DSM-IV (C DIS-IV)*.
- 1120 Rubio, G., Martínez-Gras, I., Ponce, G., Quinto, R., Jurado, R., & Jiménez-Arriero, M.Á. (2013)
1121 [Integration of self-guidance groups for relatives in a public program of alcoholism treatment].
1122 *Adicciones*, **25**, 37–44.
- 1123 Ruiz, S.M. & Oscar-Berman, M. (2015) Gender and alcohol abuse: history and sociology. In Martin, S.C.
1124 (ed), *Gender and Alcohol Abuse: History and Sociology, The SAGE Encyclopedia of Alcohol:
1125 Social, Cultural, and Historical Perspectives*. Sage Publications Los Angeles, pp. 586–591.
- 1126 Ruiz, S.M., Oscar-Berman, M., Sawyer, K.S., Valmas, M.M., Urban, T., & Harris, G.J. (2013) Drinking
1127 history associations with regional white matter volumes in alcoholic men and women. *Alcohol. Clin.
1128 Exp. Res.*, **37**, 110–122.
- 1129 Ryan, F. (2002) Attentional bias and alcohol dependence: a controlled study using the modified stroop
1130 paradigm. *Addict. Behav.*, **27**, 471–482.
- 1131 Saraceno, L., Heron, J., Munafò, M., Craddock, N., & van den Bree, M.B.M. (2012) The relationship
1132 between childhood depressive symptoms and problem alcohol use in early adolescence: findings
1133 from a large longitudinal population-based study. *Addiction*, **107**, 567–577.
- 1134 Sawyer, K.S., Adra, N., Salz, D.M., Kempainen, M.I., Ruiz, S.M., Harris, G.J., & Oscar-Berman, M.
1135 (2020) Hippocampal subfield volumes in abstinent men and women with a history of alcohol use
1136 disorder. *PLoS One*, **15**, e0236641.
- 1137 Sawyer, K.S., Maleki, N., Papadimitriou, G., Makris, N., Oscar-Berman, M., & Harris, G.J. (2018)
1138 Cerebral white matter sex dimorphism in alcoholism: a diffusion tensor imaging study.
1139 *Neuropsychopharmacology*, **43**, 1876–1883.
- 1140 Sawyer, K.S., Maleki, N., Urban, T., Marinkovic, K., Karson, S., Ruiz, S.M., Harris, G.J., & Oscar-

- 1141 Berman, M. (2019) Alcoholism gender differences in brain responsivity to emotional stimuli. *Elife*,
1142 **8**.
- 1143 Sawyer, K.S., Oscar-Berman, M., Barthelemy, O.J., Papadimitriou, G.M., Harris, G.J., & Makris, N.
1144 (2017) Gender dimorphism of brain reward system volumes in alcoholism. *Psychiatry Res*
1145 *Neuroimaging*, **263**, 15–25.
- 1146 Sawyer, K.S., Poey, A., Ruiz, S.M., Marinkovic, K., & Oscar-Berman, M. (2015) Measures of skin
1147 conductance and heart rate in alcoholic men and women during memory performance. *PeerJ*, **3**,
1148 e941.
- 1149 Schacht, J.P., Anton, R.F., & Myrick, H. (2013) Functional neuroimaging studies of alcohol cue
1150 reactivity: a quantitative meta-analysis and systematic review: Alcohol cue imaging. *Addict. Biol.*,
1151 **18**, 121–133.
- 1152 Schneider, F., Habel, U., Wagner, M., Franke, P., Salloum, J.B., Shah, N.J., Toni, I., Sulzbach, C., Hömig,
1153 K., Maier, W., Gaebel, W., & Zilles, K. (2001) Subcortical correlates of craving in recently abstinent
1154 alcoholic patients. *Am. J. Psychiatry*, **158**, 1075–1083.
- 1155 Schulte, M.T., Ramo, D., & Brown, S.A. (2009) Gender differences in factors influencing alcohol use and
1156 drinking progression among adolescents. *Clin. Psychol. Rev.*, **29**, 535–547.
- 1157 Ségonne, F., Dale, A.M., Busa, E., Glessner, M., Salat, D., Hahn, H.K., & Fischl, B. (2004) A hybrid
1158 approach to the skull stripping problem in MRI. *NeuroImage*, **22**, 1060–1075.
- 1159 Seitz, J., Sawyer, K.S., Papadimitriou, G., Oscar-Berman, M., Ng, I., Kubicki, A., Mouradian, P., Ruiz,
1160 S.M., Kubicki, M., Harris, G.J., & Makris, N. (2017) Alcoholism and sexual dimorphism in the
1161 middle longitudinal fascicle: a pilot study. *Brain Imaging Behav.*, **11**, 1006–1017.
- 1162 Seo, D., Jia, Z., Lacadie, C.M., Tsou, K.A., Bergquist, K., & Sinha, R. (2011) Sex differences in neural
1163 responses to stress and alcohol context cues. *Human Brain Mapping*, **32**, 1998–2013.
- 1164 Sharma, D., Albery, I.P., & Cook, C. (2001) Selective attentional bias to alcohol related stimuli in
1165 problem drinkers and non-problem drinkers. *Addiction*, **96**, 285–295.
- 1166 Shields, C.N. & Gremel, C.M. (2020) Review of orbitofrontal cortex in alcohol dependence: A disrupted

- 1167 cognitive map? *Alcohol. Clin. Exp. Res.*, **44**, 1952–1964.
- 1168 Sinha, R., Fox, H.C., Hong, K.A., Bergquist, K., Bhagwagar, Z., & Siedlarz, K.M. (2009) Enhanced
1169 negative emotion and alcohol craving, and altered physiological responses following stress and cue
1170 exposure in alcohol dependent individuals. *Neuropsychopharmacology*, **34**, 1198–1208.
- 1171 Sled, J.G., Zijdenbos, A.P., & Evans, A.C. (1998) A nonparametric method for automatic correction of
1172 intensity nonuniformity in MRI data. *IEEE Transactions on Medical Imaging*, **17**, 87–97.
- 1173 Sormaz, M., Murphy, C., Wang, H.-T., Hymers, M., Karapanagiotidis, T., Poerio, G., Margulies, D.S.,
1174 Jefferies, E., & Smallwood, J. (2018) Default mode network can support the level of detail in
1175 experience during active task states. *Proc. Natl. Acad. Sci. U. S. A.*, **115**, 9318–9323.
- 1176 Stritzke, W.G.K., Breiner, M.J., Curtin, J.J., & Lang, A.R. (2004) Assessment of substance cue reactivity:
1177 advances in reliability, specificity, and validity. *Psychol. Addict. Behav.*, **18**, 148–159.
- 1178 Talairach, J. & Tournoux, P. (1988) *Co-Planar Stereotaxic Atlas of the Human Brain: 3-Dimensional*
1179 *Proportional System : An Approach to Cerebral Imaging*. G. Thieme, Stuttgart.
- 1180 Tapert, S.F., Cheung, E.H., Brown, G.G., Frank, L.R., Paulus, M.P., Schweinsburg, A.D., Meloy, M.J., &
1181 Brown, S.A. (2003) Neural response to alcohol stimuli in adolescents with alcohol use disorder.
1182 *Arch. Gen. Psychiatry*, **60**, 727–735.
- 1183 Thesen, S., Heid, O., Mueller, E., & Schad, L.R. (2000) Prospective acquisition correction for head
1184 motion with image-based tracking for real-time fMRI. *Magn. Reson. Med.*, **44**, 457–465.
- 1185 Thompson-Schill, S.L., Jonides, J., Marshuetz, C., Smith, E.E., D’Esposito, M., Kan, I.P., Knight, R.T., &
1186 Swick, D. (2002) Effects of frontal lobe damage on interference effects in working memory. *Cogn.*
1187 *Affect. Behav. Neurosci.*, **2**, 109–120.
- 1188 Tops, M., Boksem, M.A.S., Quirin, M., IJzerman, H., & Koole, S.L. (2014) Internally directed cognition
1189 and mindfulness: an integrative perspective derived from predictive and reactive control systems
1190 theory. *Front. Psychol.*, **5**, 429.
- 1191 Townshend, J.M. & Duka, T. (2001) Attentional bias associated with alcohol cues: differences between
1192 heavy and occasional social drinkers. *Psychopharmacology*, **157**, 67–74.

- 1193 Uddin, L.Q., Yeo, B.T.T., & Spreng, R.N. (2019) Towards a universal taxonomy of macro-scale
1194 functional human brain networks. *Brain Topogr.*, **32**, 926–942.
- 1195 Verplaetse, T.L., Cosgrove, K.P., Tanabe, J., & McKee, S.A. (2021) Sex/gender differences in brain
1196 function and structure in alcohol use: A narrative review of neuroimaging findings over the last 10
1197 years. *J. Neurosci. Res.*, **99**, 309–323.
- 1198 Volkow, N.D., Wang, G.-J., Tomasi, D., & Baler, R.D. (2013) The addictive dimensionality of obesity.
1199 *Biological Psychiatry*, **73**, 811–818.
- 1200 Vollstädt-Klein, S., Loeber, S., Kirsch, M., Bach, P., Richter, A., Bühler, M., von der Goltz, C., Hermann,
1201 D., Mann, K., & Kiefer, F. (2011) Effects of cue-exposure treatment on neural cue reactivity in
1202 alcohol dependence: a randomized trial. *Biol. Psychiatry*, **69**, 1060–1066.
- 1203 Wechsler, D. (1997) *WAIS-III, Wechsler Adult Intelligence Scale, Third Edition: WMS-III, Wechsler*
1204 *Memory Scale, Third Edition: Technical Manual*. Psychological Corporation, San Antonio, TX.
- 1205 Wiers, C.E., Stelzel, C., Park, S.Q., Gawron, C.K., Ludwig, V.U., Gutwinski, S., Heinz, A., Lindenmeyer,
1206 J., Wiers, R.W., Walter, H., & Berman, F. (2014) Neural correlates of alcohol-approach bias in
1207 alcohol addiction: the spirit is willing but the flesh is weak for spirits. *Neuropsychopharmacology*,
1208 **39**, 688–697.
- 1209 Woo, C.-W., Krishnan, A., & Wager, T.D. (2014) Cluster-extent based thresholding in fMRI analyses:
1210 pitfalls and recommendations. *Neuroimage*, **91**, 412–419.
- 1211 World Health Organization (2019) *Global Status Report on Alcohol and Health 2018*. World Health
1212 Organization.
- 1213 Wrase, J., Grüsser, S.M., Klein, S., Diener, C., Hermann, D., Flor, H., Mann, K., Braus, D.F., & Heinz,
1214 A. (2002) Development of alcohol-associated cues and cue-induced brain activation in alcoholics.
1215 *Eur. Psychiatry*, **17**, 287–291.
- 1216 Yeo, B.T.T., Krienen, F.M., Eickhoff, S.B., Yaakub, S.N., Fox, P.T., Buckner, R.L., Asplund, C.L., &
1217 Chee, M.W.L. (2016) Functional specialization and flexibility in human association cortex. *Cereb.*
1218 *Cortex*, **26**, 465.

- 1219 Zhang, R. & Volkow, N.D. (2019) Brain default-mode network dysfunction in addiction. *Neuroimage*,
1220 **200**, 313–331.
- 1221 Zhou, H.-X., Chen, X., Shen, Y.-Q., Li, L., Chen, N.-X., Zhu, Z.-C., Castellanos, F.X., & Yan, C.-G.
1222 (2020) Rumination and the default mode network: Meta-analysis of brain imaging studies and
1223 implications for depression. *Neuroimage*, **206**, 116287.
- 1224