

New Advances in the Treatment of Problem and Pathological Gambling

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Overview

- A. Definitions and prevalence rates
- B. Consequences and comorbidities
- C. Treatments for gambling
 - Cognitive-behavioral therapy
 - Brief interventions

A.) Definitions

Gambling is defined as

“placing money on some event that has a possibility of resulting in some advantage.”

Types of gambling



Cards, dice, animal races, jai alia, slot machines, roulette, bingo, video poker, sporting events, playing sports, lottery tickets, scratch tickets, high risk stocks or commodities, internet gambling.



Types of gamblers


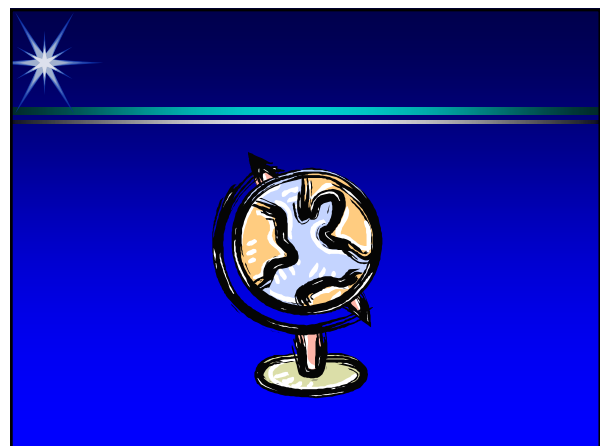
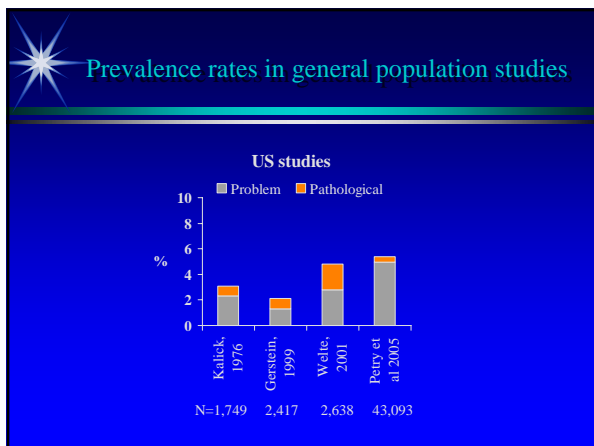
- Level 1– social or recreational gambling
- Level 2– problem, at risk, in transition gambling
- Level 3– DSM-IV diagnosis of pathological gambling (compulsive gambling)

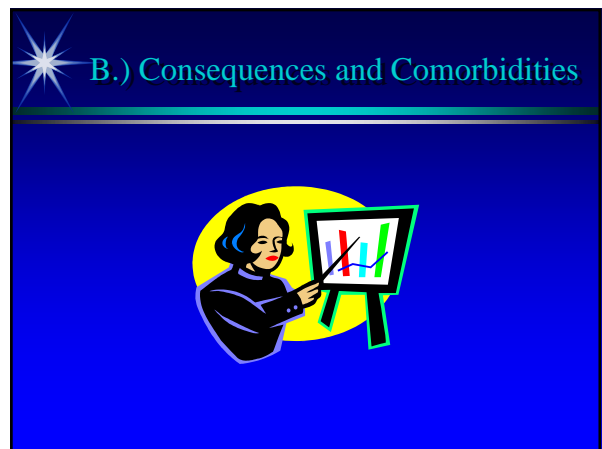
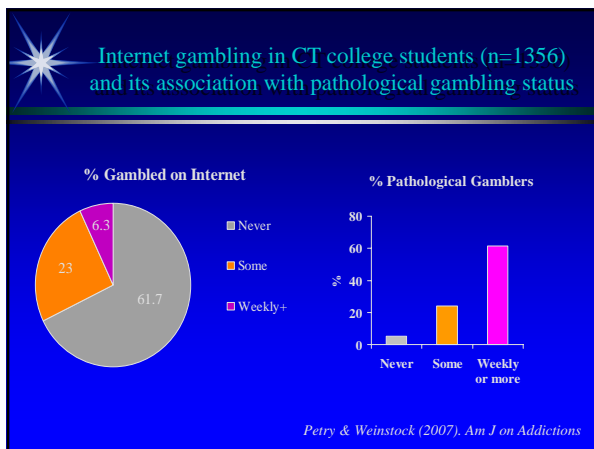
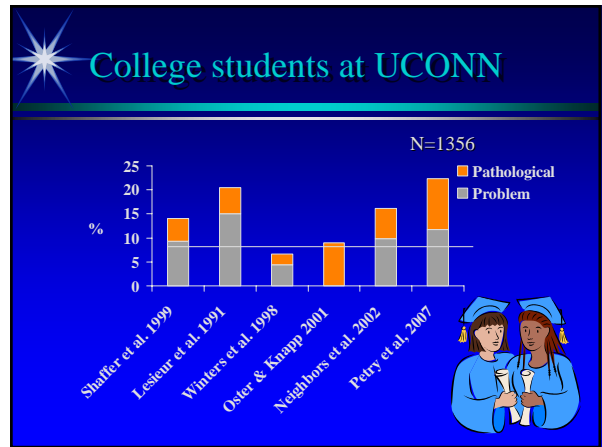
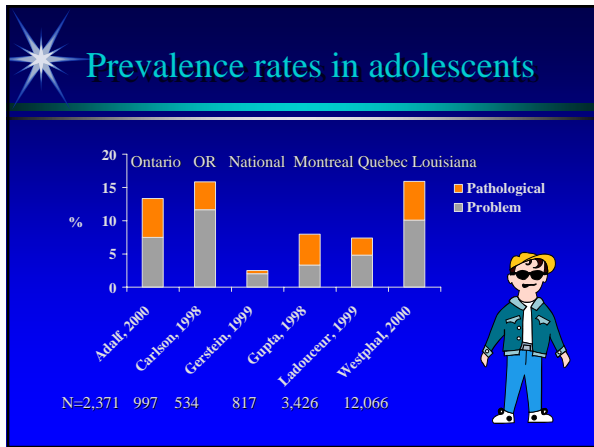
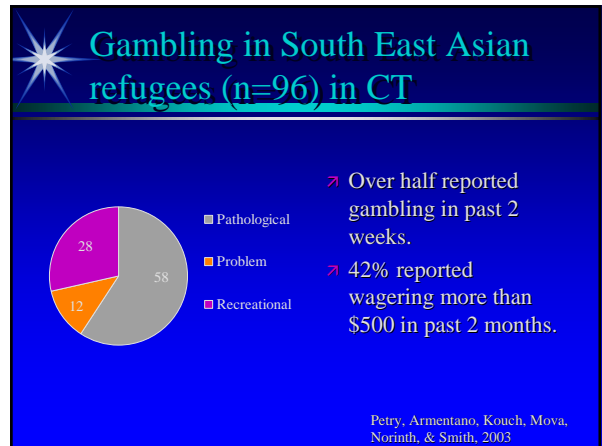
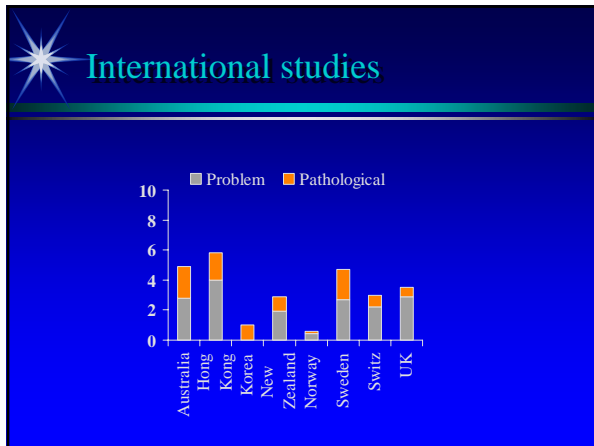


DSM-IV Criteria for Pathological Gambling

1. Preoccupied with gambling
2. Need to gamble with increasing amounts of money.
3. Repeated unsuccessful efforts to cut down or stop gambling.
4. Restless or irritable when attempting to cut down.
5. Gambles to escape problems or relieve negative mood.
6. "Chases" lost money. Returns to gambling to get even.
7. Lies to others to conceal extent of gambling.
8. Commits illegal acts to finance gambling.
9. Jeopardizes or loses important relationship or job due to gambling.
10. Relies on others to relieve desperate financial situations caused by gambling.


Prevalence rates in general population surveys



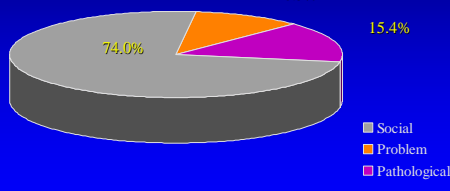
Medical problems

- ↗ insomnia
- ↗ high blood pressure
- ↗ cardiac disorders
- ↗ intestinal disorders
- ↗ poorer general health than non-problem gamblers



Pasternak & Fleming (1999)

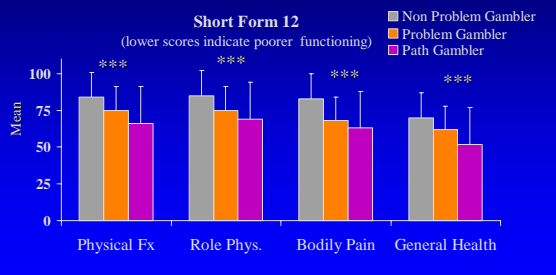
Patients treated at UCONN and inner city medical clinics



Ladd & Petry, 2002

Physical and medical problems in adults recruited from general medical clinics (n=1,405)

Short Form 12 (lower scores indicate poorer functioning)





*** p<.001

Morasco, von Eigem, & Petry, 2006

Financial and legal consequences

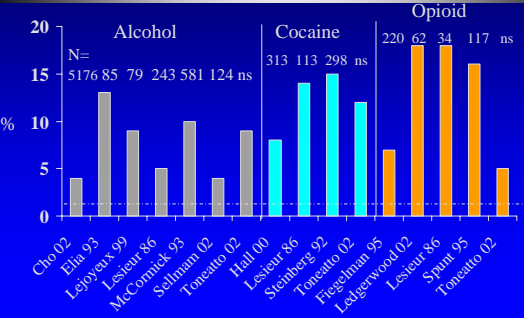
- ↗ Financial
 - \$38,000-\$113,000 average debt
 - 30% file for bankruptcy
- ↗ Legal
 - 60% commit illegal acts

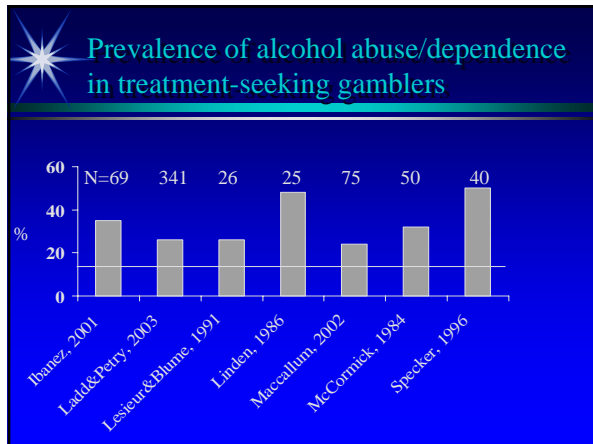



Substance abuse and gambling



Prevalence of pathological gambling in treatment-seeking substance abusers





Psychiatric comorbidity

- Substance use disorders
- Attention deficit disorder
- Anxiety
- Depression
- Suicide
 - contemplation 48-70%
 - attempt 13-20%

➤ Almost all data derived from treatment-seeking gamblers rather than community samples.

National Epidemiological Survey on Alcohol and Related Conditions (NESARC)

- Face-to-face personal interviews with 43,093 respondents
- 18 years and older in the civilian noninstitutional population residing in households and group quarters
- 81% response rate
- African Americans, Hispanics, and young adults (ages 18-to-24) were oversampled.
- Conducted in 2001-2002
- Supported by NIAAA
- Included a module on pathological gambling (Petry, Stinson, & Grant, 2005).

Comorbidity of psychiatric disorders with pathological gambling

	OR (95% CI)	PGs with disorder (%)
Alcohol*	6.0 (3.8-9.7)	73.22
Drug*	4.4 (2.9-6.6)	38.10
Nicotine*	6.7 (4.6-9.9)	60.37
Major depression*	3.3 (2.3-4.9)	36.99
Dysthymia*	3.3 (1.9-5.6)	13.20
Mania*	8.0 (4.7-13.7)	22.80
Panic disorder w/ agoraphobia*	5.2 (2.6-10.5)	5.09
Social phobia*	2.2 (1.2-4.1)	10.55
Specific phobia*	3.5 (2.2-5.5)	23.54
Generalized anxiety*	3.1 (1.8-5.3)	11.15
Any personality disorder*	8.3 (5.6-12.3)	60.82


Petry et al. (2005) J Clin Psychiatry

C.) Treatments for gambling

- ### Treatments applied
- 1.) Pharmacotherapy
 - 2.) Self-help
 - 3.) Inpatient
 - 4.) Marital/family
 - 5.) Psychoanalytic
 - 6.) Cognitive-behavioral
 - 7.) Brief treatments

Gamblers Anonymous


- Over 1000 chapters in US
- Social support
- Financial advice, pressure relief



- Overall attrition rates are high, abstinence is low (Stewart & Brown, 1988).

Cognitive-behavioral therapy

- 1.) Triggers
- 2.) Functional analysis
- 3.) Pleasant activities
- 4.) Self-management
- 5.) Coping with urges
- 6.) Assertiveness training/refusal skills
- 7.) Correcting irrational thinking
- 8.) Preparing for emergencies



Treatment study

Pathological gamblers randomly assigned to:

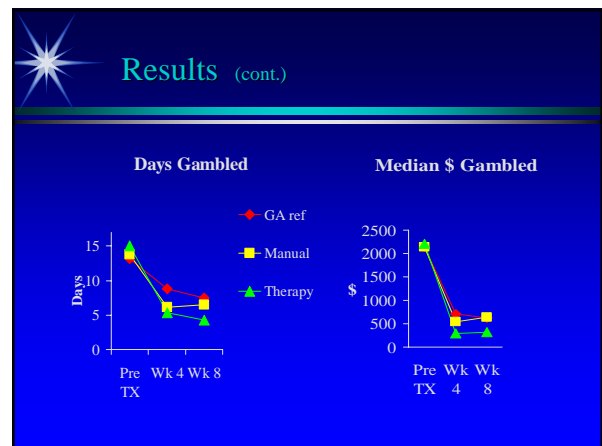
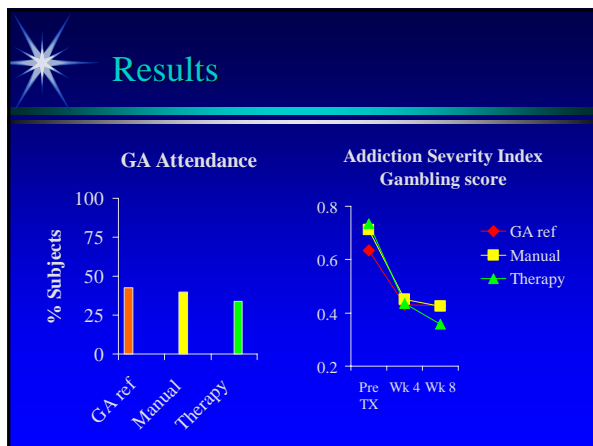
- 1.) Referral to GA

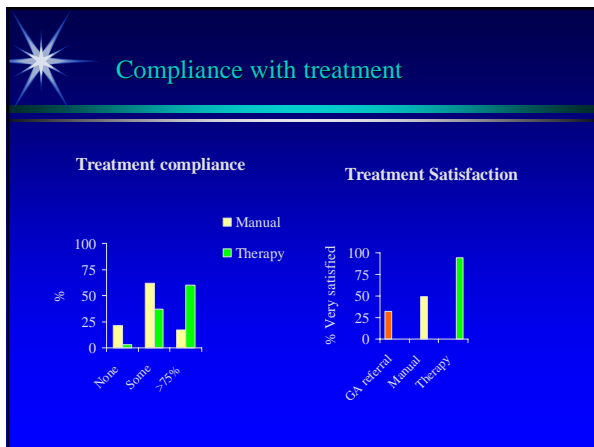
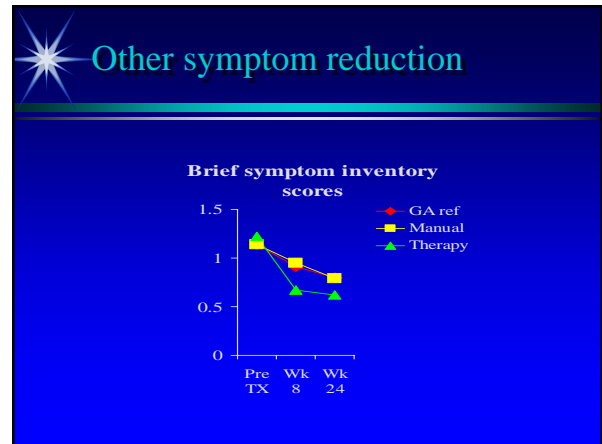
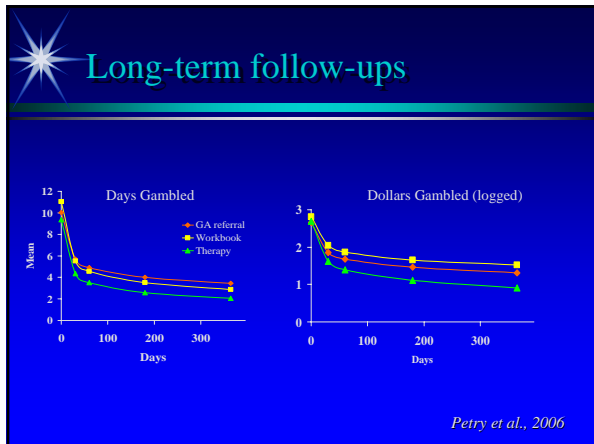
- 2.) Referral to GA plus CBT self-help manual

- 3.) Referral to GA plus professionally-delivered CBT


Demographics

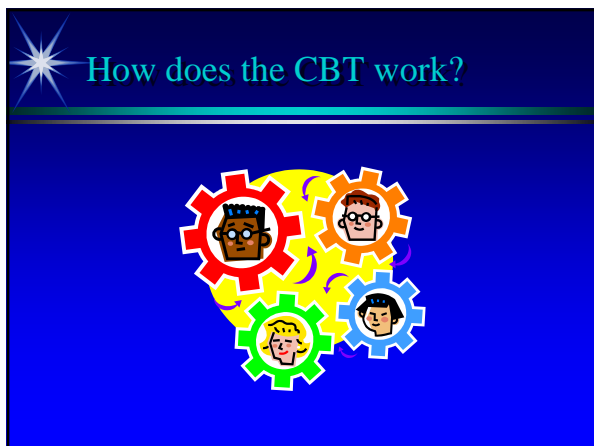
	GA Ref	Manual	Therapy
n	63	84	84
Male	50.0%	57.6%	58.8%
Caucasian	81.3%	84.7%	84.7%
Age	44.5	44.2	46.0
Married	39.1%	36.5%	42.4%
Income	\$42,500	\$43,000	\$46,000
Prev. Subs Abuse TX	31.7%	29.8%	21.2%





Predictors of abstinence in those assigned to a CB condition

	Wald, p value	OR (95% CI)
Gender	n.s.	
Age	n.s.	
Ethnicity	n.s.	
Psych severity	n.s.	
GA meetings attended	n.s.	
Tx cond. (Workbook vs individual therapy)	n.s.	
CB sessions/chapters completed	5.36, p<.02	1.16 (1.02-1.31)



- ### 1.) Identify triggers
- Places where you are likely to gamble:
 - People with whom you are likely to gamble:
 - Times or days when you are likely to gamble:
 - Activities that make it likely you'll gamble:
 - Emotions or feelings that make it likely you'll gamble:

Identify when you don't gamble.

- Places where you don't gamble:
- People with whom you don't gamble:
- Times or days when you don't gamble:
- Activities that you do when you aren't gambling:
- Emotions or feelings that don't make you feel like gambling:

2.) Consequences

- What are the positive effects from gambling?
 - get away relaxing
 - exciting win \$
- What are the negative effects from gambling?
 - lose \$ more arguing
 - depressed lose self respect

Functional analysis

Trigger	Thoughts & Feelings	Behavior	+Effects	-Effects
1. creditor	worried/angry gambling only option	casino Nov 8	felt lucky	lost more \$
2. weekend	felt bored	races Oct 30	excited	angry , depressed

3.) Increase other activities

- Pleasant events checklist.
- List favorite activities: spontaneous and planned.
- Identify people and times to try at least one activity in the upcoming week.
- Substitute

High-risk time	Other activity
1.) _____	1.) _____
2.) _____	2.) _____
3.) _____	3.) _____

7.) Changing irrational thinking

What are the odds of winning a million dollars?

Overestimate odds of winning

The odds of:

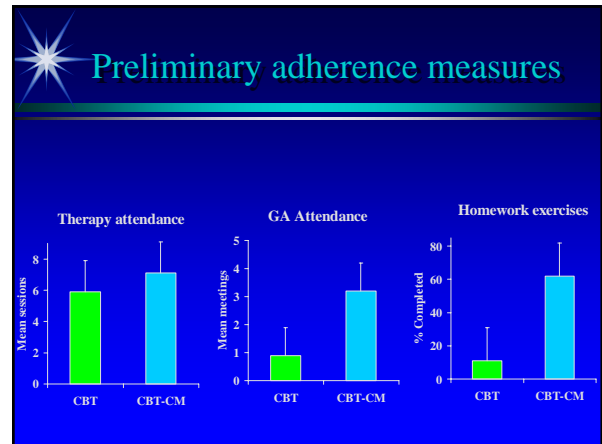
Winning \$1 million	1 in 13,000,000
Killed in car accident	1 in 53,000
Choking to death	1 in 68,000
Struck by lightning	1 in 2,000,000

New study

Everyone meets with a therapist once weekly for 8 weeks

- Psychoeducation plus case management
- Cognitive-behavioral therapy
- Cognitive-behavioral therapy plus contingency management

Longer term (2 year) follow-ups included.



Brief interventions

Two cartoon characters, one in a suit and one in a lab coat, are standing side-by-side.

Rationale

Despite the large numbers and adverse consequences of disordered gambling, fewer than 8% of pathological gamblers ever seek or receive services (National Research Council, 1999).

Virtually no problem gamblers seek or receive services (NGISC, 1999).

What can we do?

- Expand treatment services.
- Expand outreach.
- Determine reasons why people don't seek services.
- Tailor interventions to fit the needs of the patients who would be most likely to benefit from them.

Brief interventions for reducing heavy alcohol use.

- Simple advice
- Motivational enhancement therapy
- 1-4 sessions

Two cartoon characters, one in a suit and one in a lab coat, are standing side-by-side.

Brief treatments for problem gamblers

Screening efforts

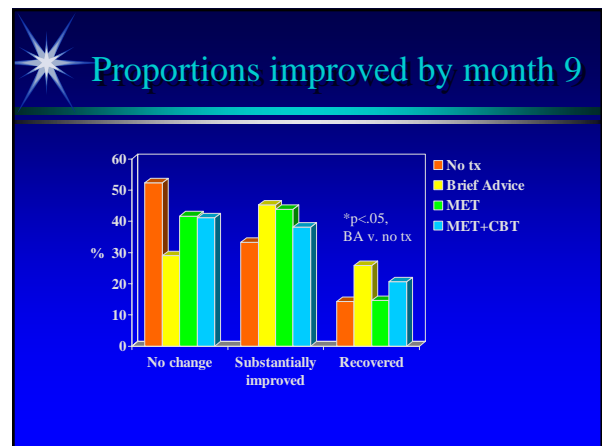
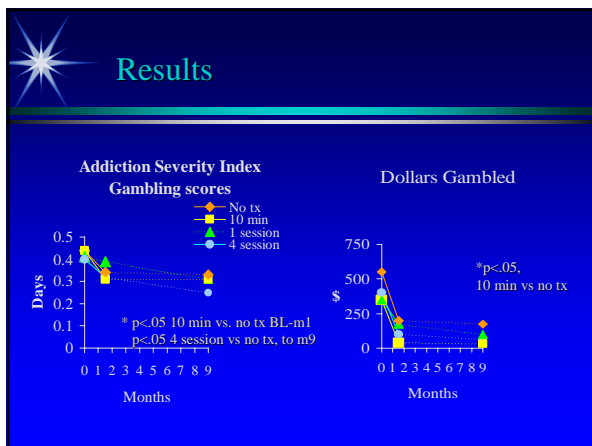
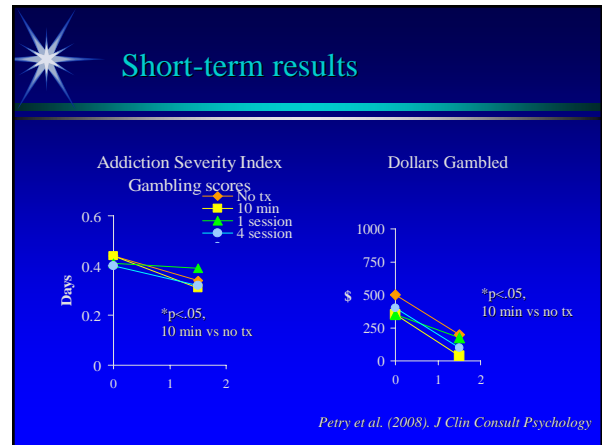
- Substance abusers
- Medical/dental patients
- Older adults (senior centers)
- Gambling establishment patrons

Random assignment

1. Evaluation plus no-treatment control
2. Evaluation plus 5 minutes of brief advice
3. Evaluation plus 1 session of Motivational Enhancement Therapy
4. Evaluation plus 4 sessions of therapy (MET+CBT)

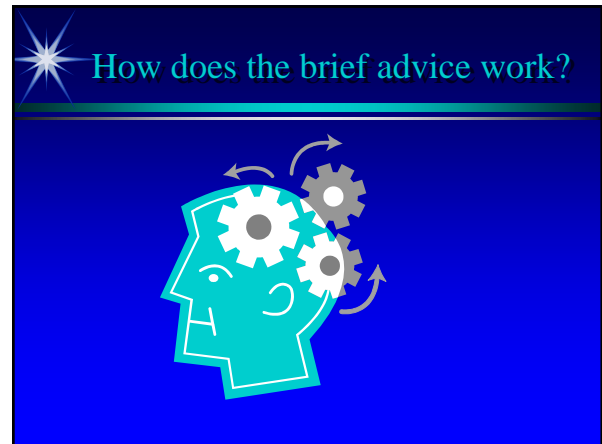
Demographics

	No tx	10 min Brief Advice	1 session of MET	4 sessions MET+CBT
n	48	37	55	40
Female	31%	51%	36%	45%
Caucasian	61%	66%	65%	60%
Age	41	44	45	44
Income	\$25,871	\$23,583	\$27,277	\$31,552
Education	12.5	13.5	13.8	13.2



Predicting recovered/substantially improved at month 9

Variable	Beta	Wald	p value	Odds ratio (95% CI)
Female	-.36	.80	.37	
Age	-.01	.36	.55	
SOGS	-.17	10.5	p<.001	0.84 (.76-.93)
ASI-med	-1.28	5.11	p<.05	0.28 (.09-.84)
ASI-alc	1.61	0.97	.33	
ASI-drug	-3.07	.83	.36	
BSI	-.02	0.00	.96	
Brief Advice	1.81	8.42	p<.01	6.08 (1.8-20.6)
MET	.86	2.85	.09	
MET/CBT	.78	1.96	.16	



- ### Point out their specific risk factors for problem gambling.
- Substance abuse
 - Family members
 - Psychiatric problems
 - Frequency and quantity of gambling
 - Superstitious thinking
 - Major life changes

- ### Brief advice
- Limit amount of money spent gambling.
 - Cash only, limited access, leave ATM/credit cards at home.
 - Limit amount of time and days gambling.
 - Not daily, commitments with others
 - Don't expect to win.
 - Spend time on other recreational activities.

Summary

- Problem and pathological gambling is fairly common and associated with adverse family, social, and medical consequences.
- Cognitive-behavioral therapy is efficacious in reducing gambling problems in pathological gamblers.
- Problem gamblers are unlikely to seek treatment, so direct screening and intervention strategies seem useful.
- Very brief interventions appear effective in reducing problem gambling.

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Gambling treatment manuals and handouts are available in:

Petry, N.M. Pathological Gambling: Etiology, Comorbidity, and Treatment. American Psychological Association Press: Washington, DC.

<http://books.apa.org/books.cfm?id=4316046>