



Dual Diagnosis and Pathological Gambling

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Rhode Island Gambling Treatment Program

Rhode Island Hospital

www.gamblingtreatment.org

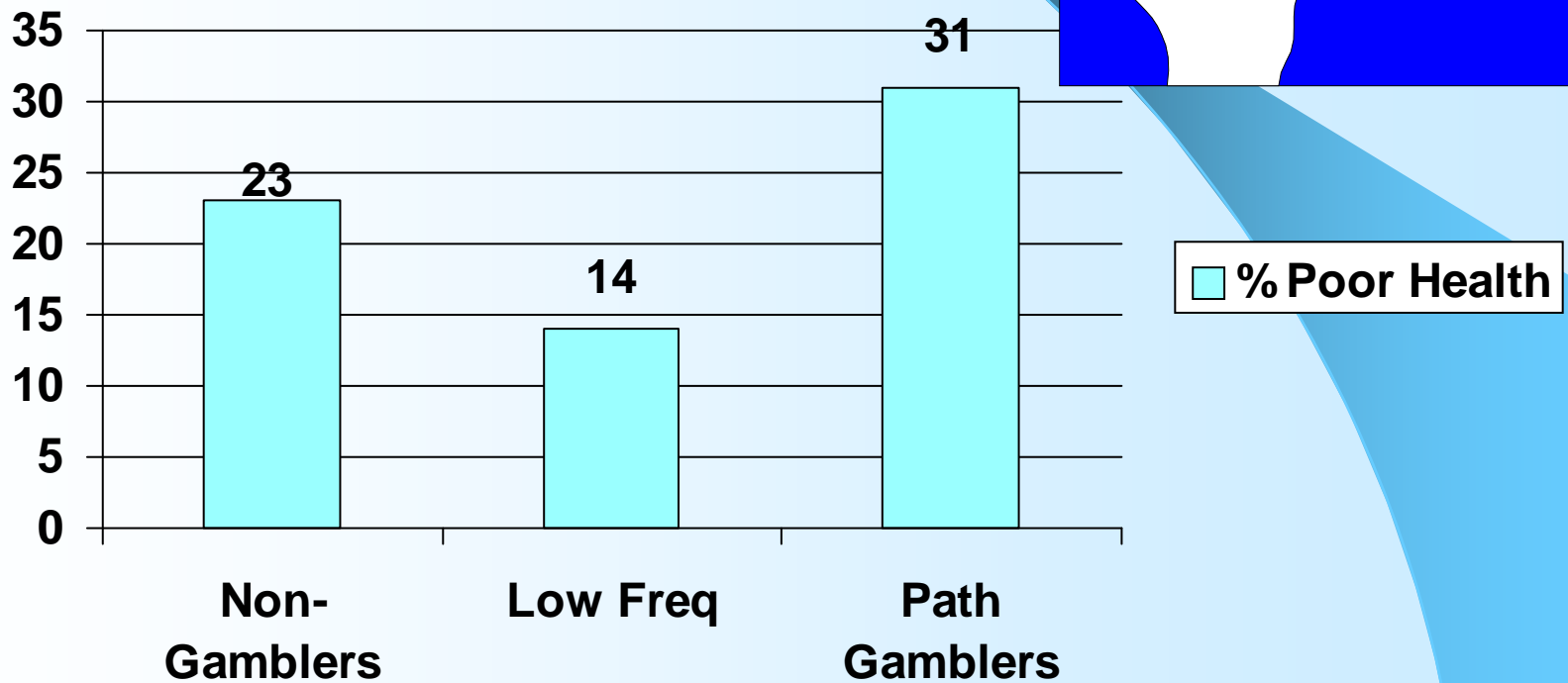
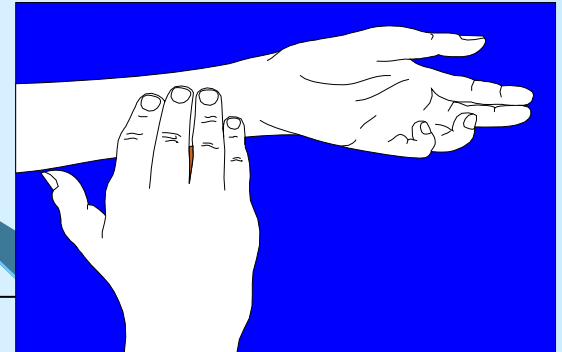
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Topics to be discussed

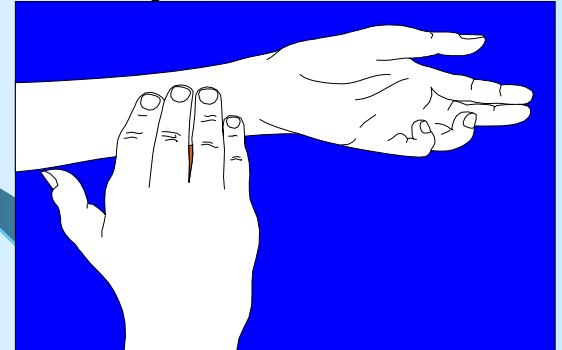
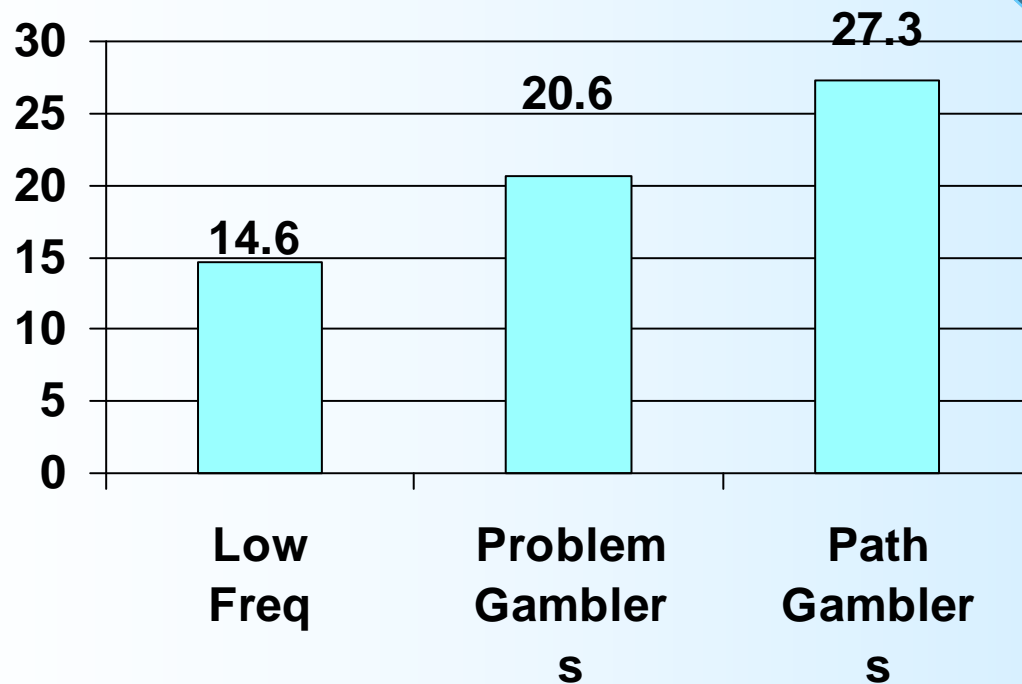
- Pathological gambling and Health
- Pathological gambling and Mental Health
- Assessment
- The Basic CBT Model
- Modifications for Different Disorders

Poor Health and Pathological Gambling



Source: NORC, 1999

Inpatient Hospitalization Among Gamblers (Indiana, 1998)

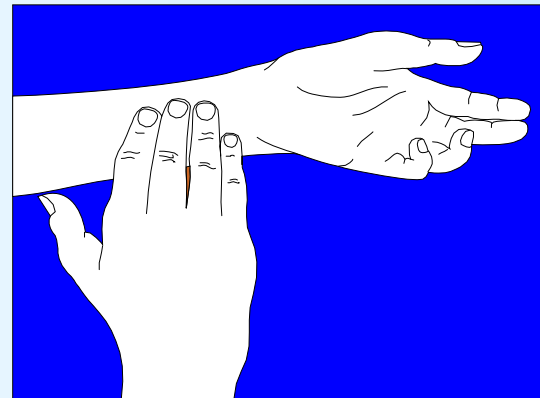


■ % Inpatient in Past year

Source: (Westphal, Rush & Stevens, 1998)

Medical Problems Among Pathological Gamblers - 1

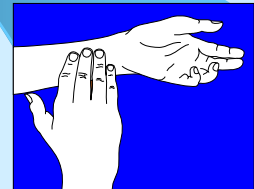
- Depression
- Intestinal Disorders
- Cardiovascular Problems
- High Blood Pressure
- Migraines
- Stress-related Disorders
- Allergies
- Respiratory Problems
- Oral-Dental Disease
- Nerve-Sensory System Disorders



Health & Problem Gambling-2

2006 National Epidemiological Survey on Alcoholism and Related Conditions

- **43,000 Americans surveyed in 2006**
- **Pathological gamblers had higher rates of:**
 - **Anxiety disorders; depression; alcohol & substance abuse; cigarette smoking**
 - **Stress-related health issues like hypertension and migraines**
 - **Liver disease, high blood pressure, high heart rate and angina after controlling for demographic characteristics, obesity, cigarette smoking, and mood and anxiety disorders**





Medical Problems Among Pathological Gamblers - 3

- Neurological studies point to poor performance on gambling tasks when there is brain damage & disease
- Case reports with Huntington's disease
- Parkinson's Disease (PD) patients have higher rates of Pathological Gambling
- 12/250 (5%) PD patients
- 17/388 (4.4%) PD patients
- 26/203 (13%) PD patients vs. 7/236 (3%) ALS patients
- 9 out of 1,884 PD patients (1%) chart review – this method would underreport
- 13/140 (9.3%) PD patients with problem or pathological gambling
- Case reports with dopamine agonists & Restless Leg Syndrome
- Case reports with dopamine agonists & Fibromyalgia



Medical Problems Among Pathological Gamblers - 4

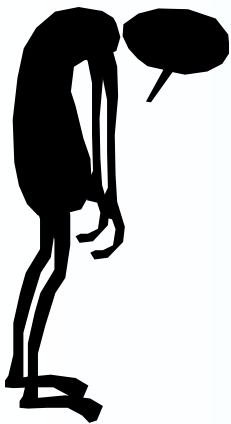
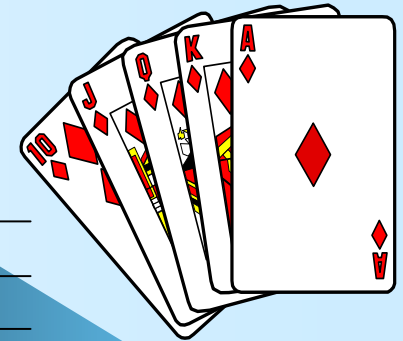
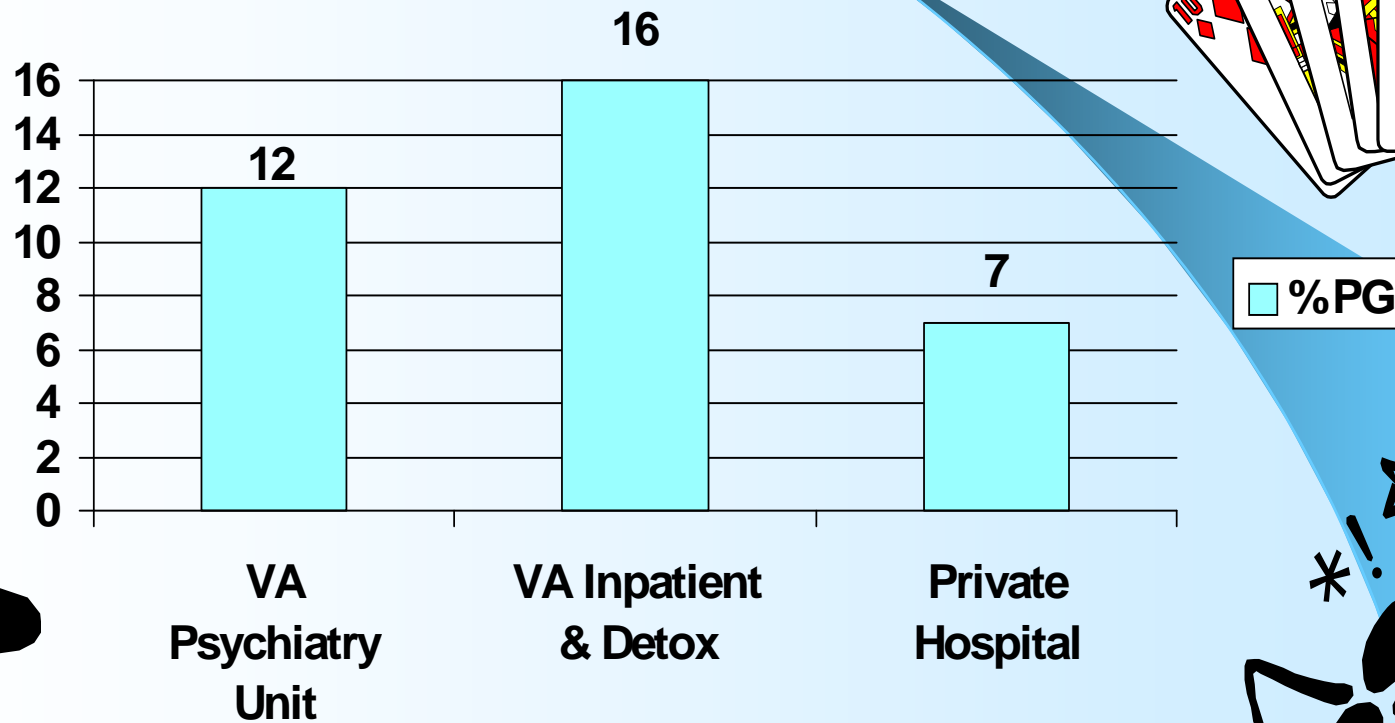
- PG associated with high dopamine agonist levels (all new cases of PG had this association in one study)
- Personal or family history of alcohol use disorders associated with greater risk when using dopamine agonists
- PG associated with DRD2 and DRD4 receptor sites in genetic studies, DRD3 in one PD study
- Increased activation of reward seeking, reduced inhibition of impulsive drives and increased cravings have been shown in one study of PG with PD vs. PG without PD – neuroimaging study



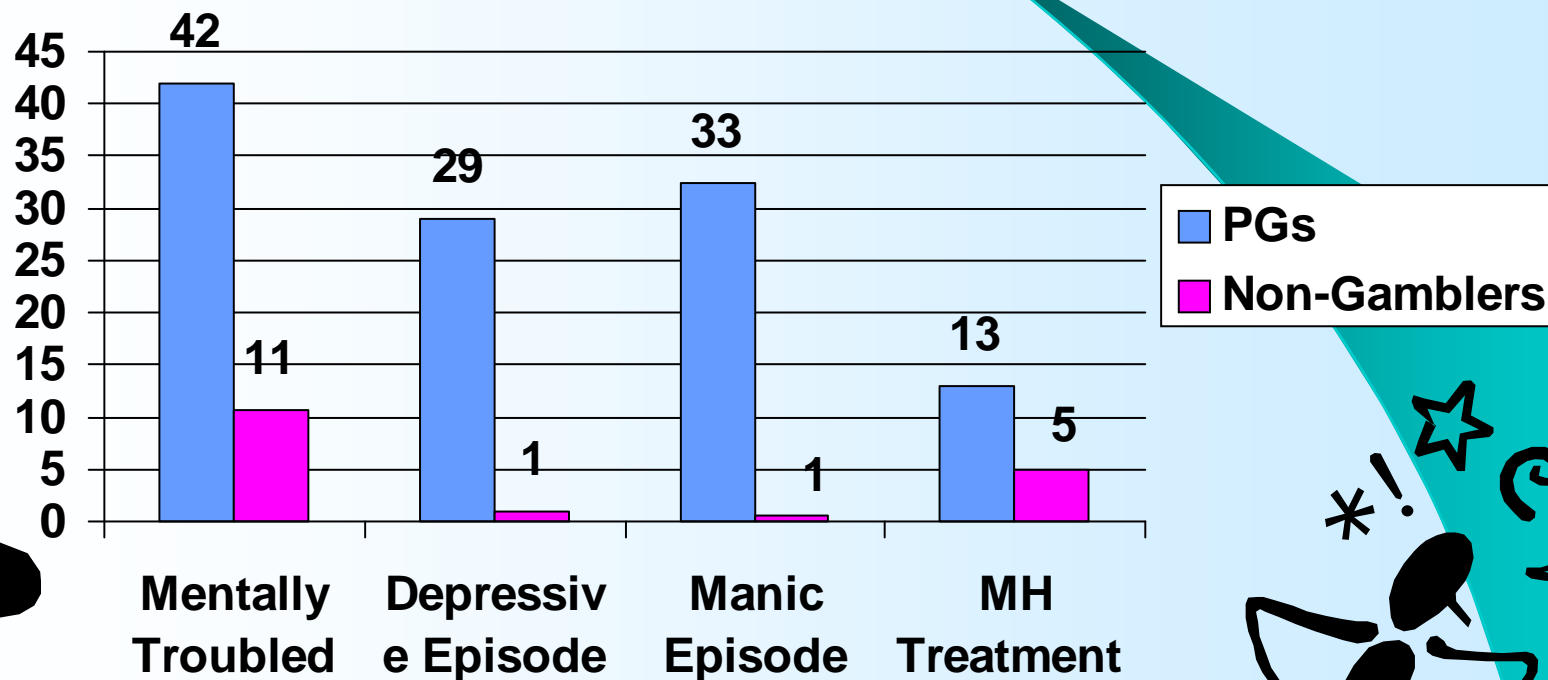
What to do with Parkinson's & Restless Leg Syndrome

- **Get in contact with the neurologist or PCP**
- **Mention the relationship between PG and dopamine reward pathway (most neurologists are aware)**
- **Mention that dopamine agonists have been found to be association with PG.**
- **Work with the spouse, significant others.**
- **Discuss feelings of dependency & loss of employment in therapy for PD-PGs as well as fibromyalgia.**
- **Advocate for self-exclusion & control over finances when appropriate (problems with shifting set for PD-PGs)**

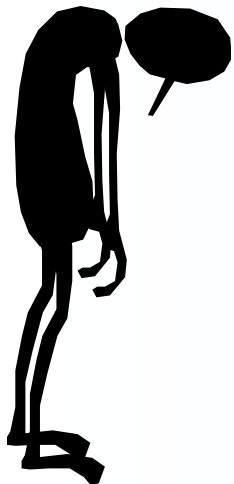
Pathological Gambling Among Mental Patients



Mental Health and Gambling Problems -- NORC, 1999



Depressive & Manic in lifetime; Others Past Year



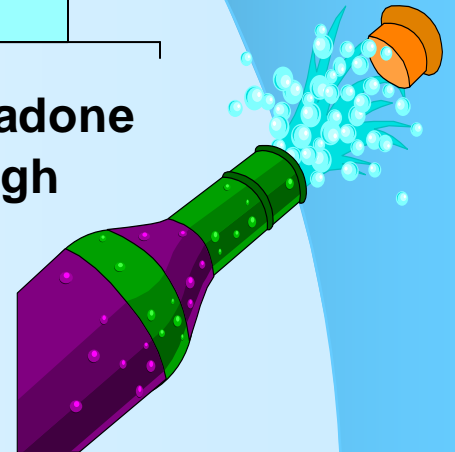
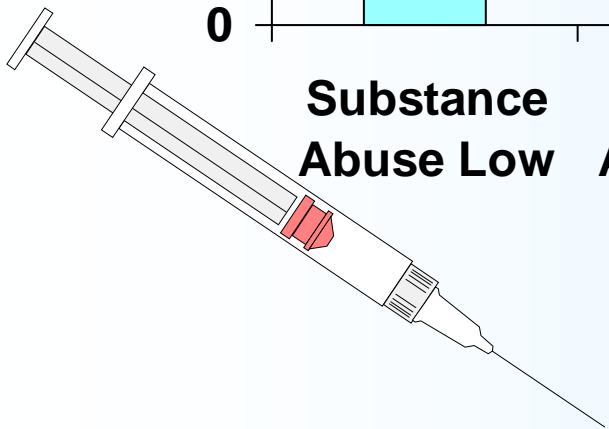
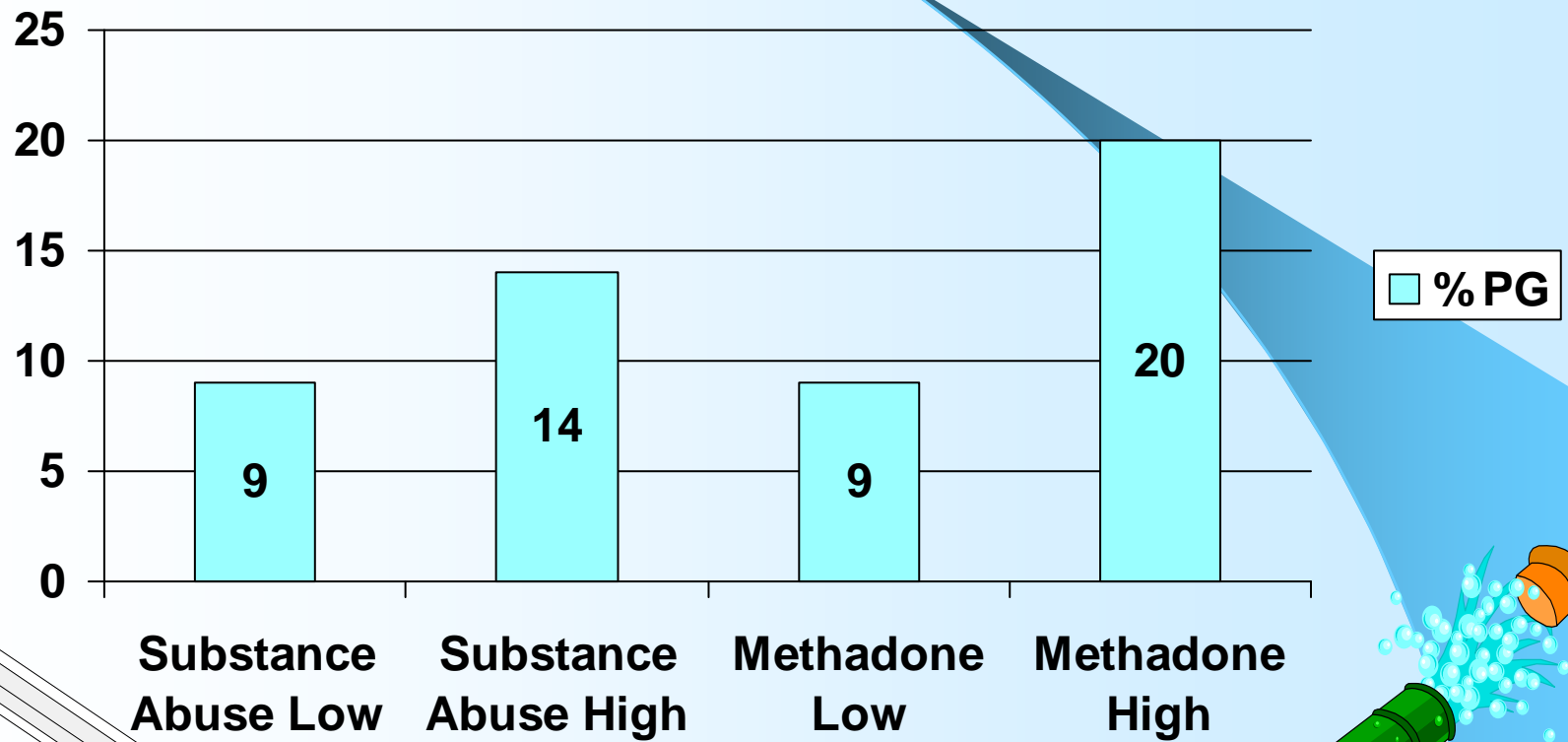
Clinical Studies of PGs & Mental Illness

- Studies find similar results:
- 32% to 78% with MDD
- 8-24% bipolar disorder (& hypomanic)
- 27-38% with anxiety disorders including PTSD, phobias and panic disorder
- High rates of ADD and ADHD
- Studies point to wide range of personality disorders with Cluster B the most frequent followed by Cluster C.

Physical & Sexual Trauma

- **23% of male VA inpatients (1987)**
- **33% mixed gender Minn. outpatient (1996)**
- **Studies including emotional trauma**
- **82% of women/32% of men Maryland outpatient**
- **100% of women/61% of men Indiana inpatient (only 9 women in sample)**
- **PG associated with high rates of both perpetration and victimization of dating violence, marital violence, and severe child abuse (2009)**

Pathological Gambling Among Substance Abuse Clients



Moderate/Problem Gambling Among Substance Abuse and Mental Disorder in Canadian Population (n=36,885)



SA=substance abuse; **SD=**substance dependence; **MD=**mental disorder

Source: Rush, B.R., Bassani, D.G., Urbanowski, K.A. & Castel, S. (2008) Influence of co-occurring mental and substance use disorders on the prevalence of problem gambling in Canada. *Addiction*, 103, 1847-1856.

Process Addictions and Problem Gambling

- Compulsive buying
- Shoplifting/theft
- Sexual addiction

Dysfunctional Behaviors Among Ontario Women Who Play Bingo

Boughton & Brewster (2002)

| Process Addiction | Current/Past – Bingo Players (n=69) | Current/Past – Slots Players (n=96) |
|---------------------|-------------------------------------|-------------------------------------|
| Compulsive Shopping | 36/69=45% | 19/96=49% |
| Shoplifting | 9/69=30% | 4/96=16% |
| Sexual Behavior | 13/69=33% | 6/96=26% |

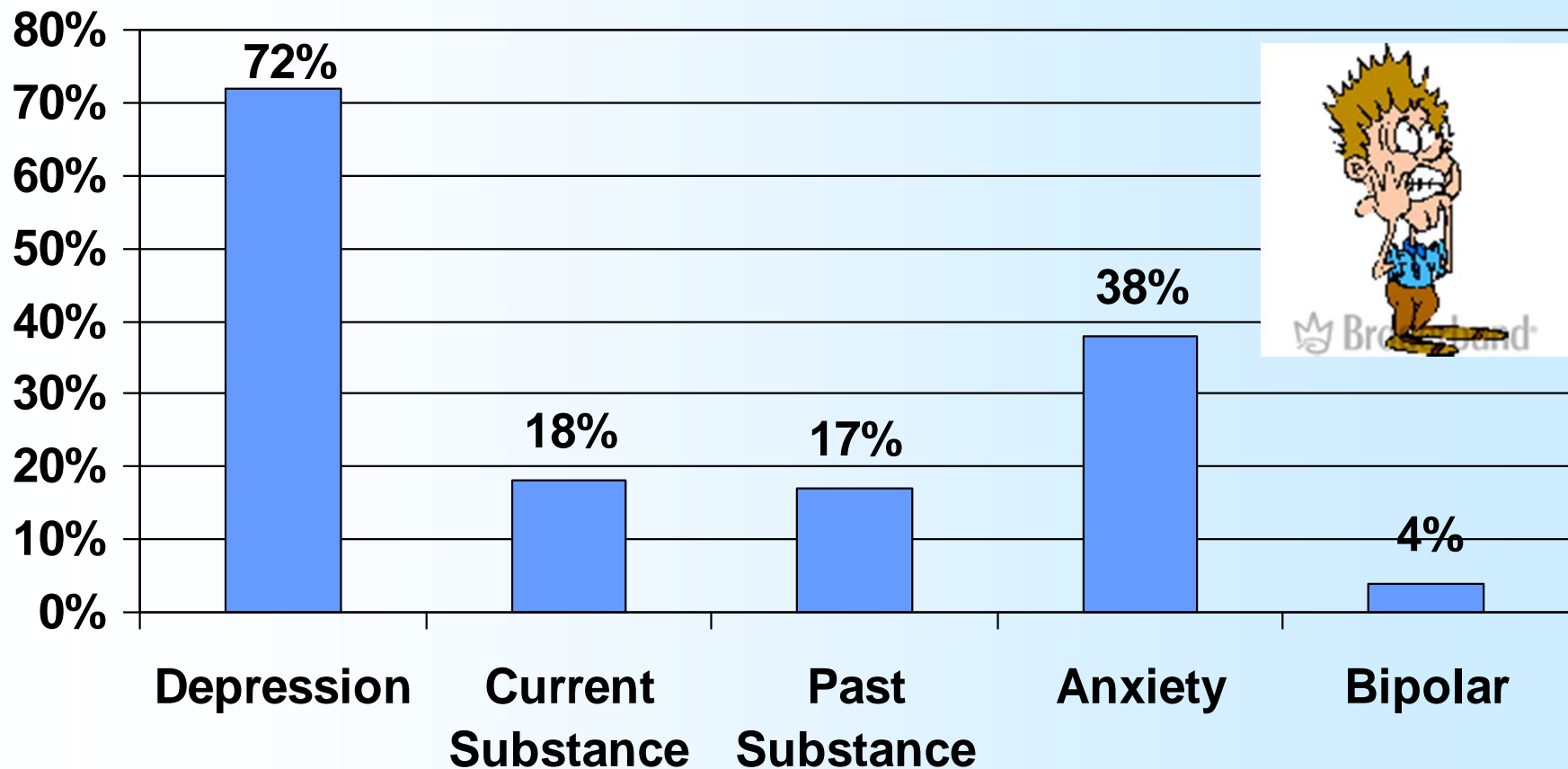


Pathological Gambling in Substance Abusers and Sexual Risk Taking -- Petry

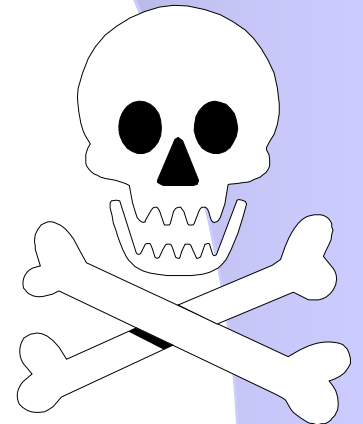
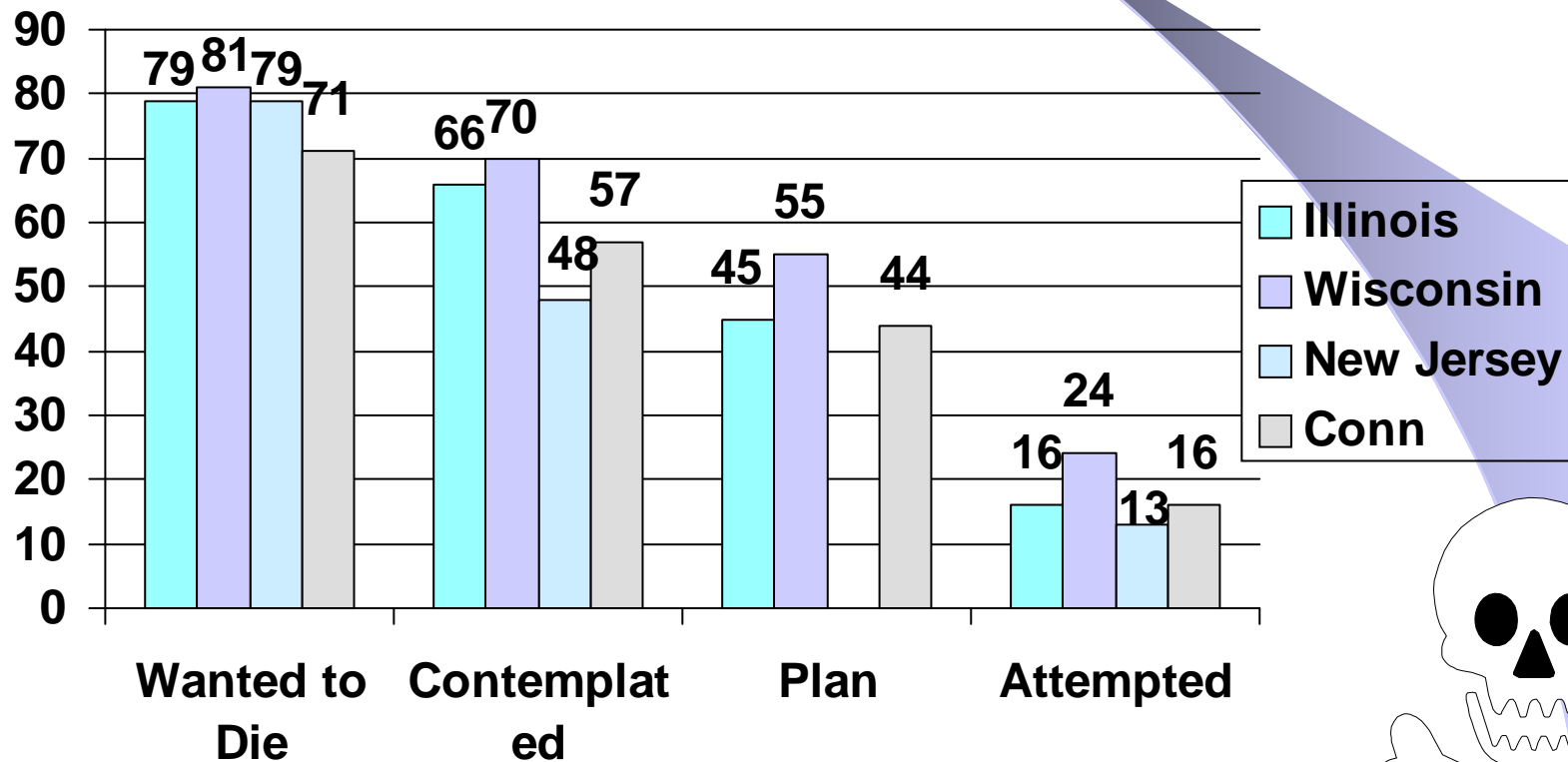
- Higher SOGS associated with >50 sex partners
- SOGS associated with exchange of sex for money/drugs
- SOGS associated with anal intercourse
- Ergo – PG & Substance Abuse may increase risk for AIDS

Psychiatric Disorders in Rhode Island Problem Gamblers (%)

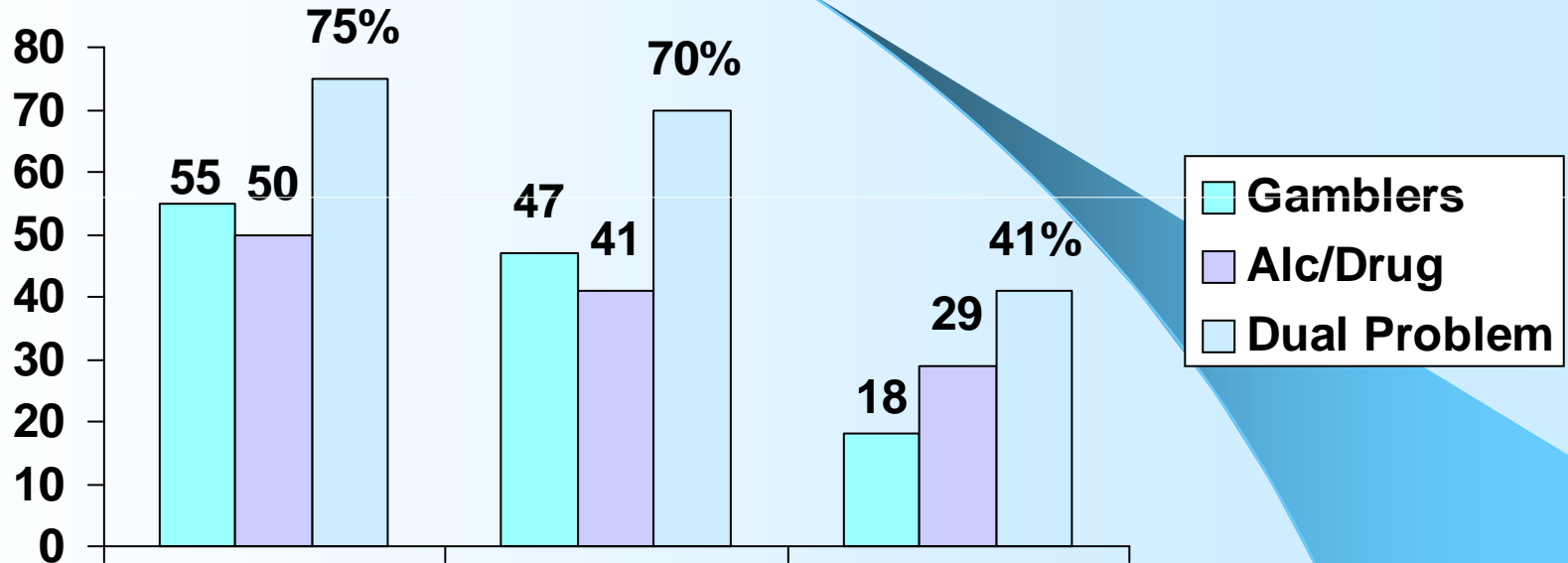
(Total number of patients is 136)



Suicidal Ideation Among Gamblers Anonymous Members



SUICIDE AND DUAL TROUBLE

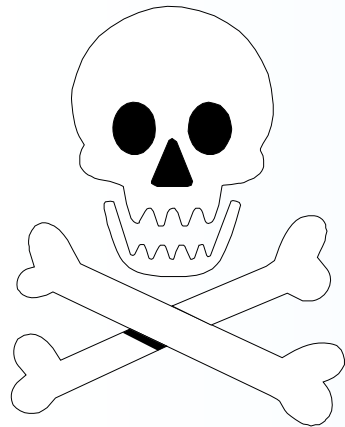


Not Worth Living

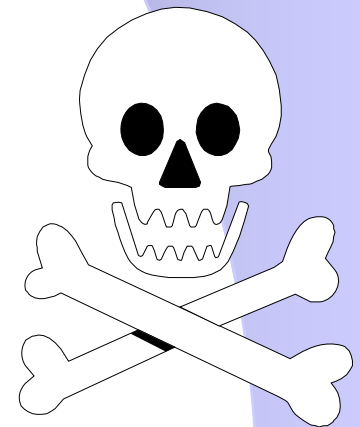
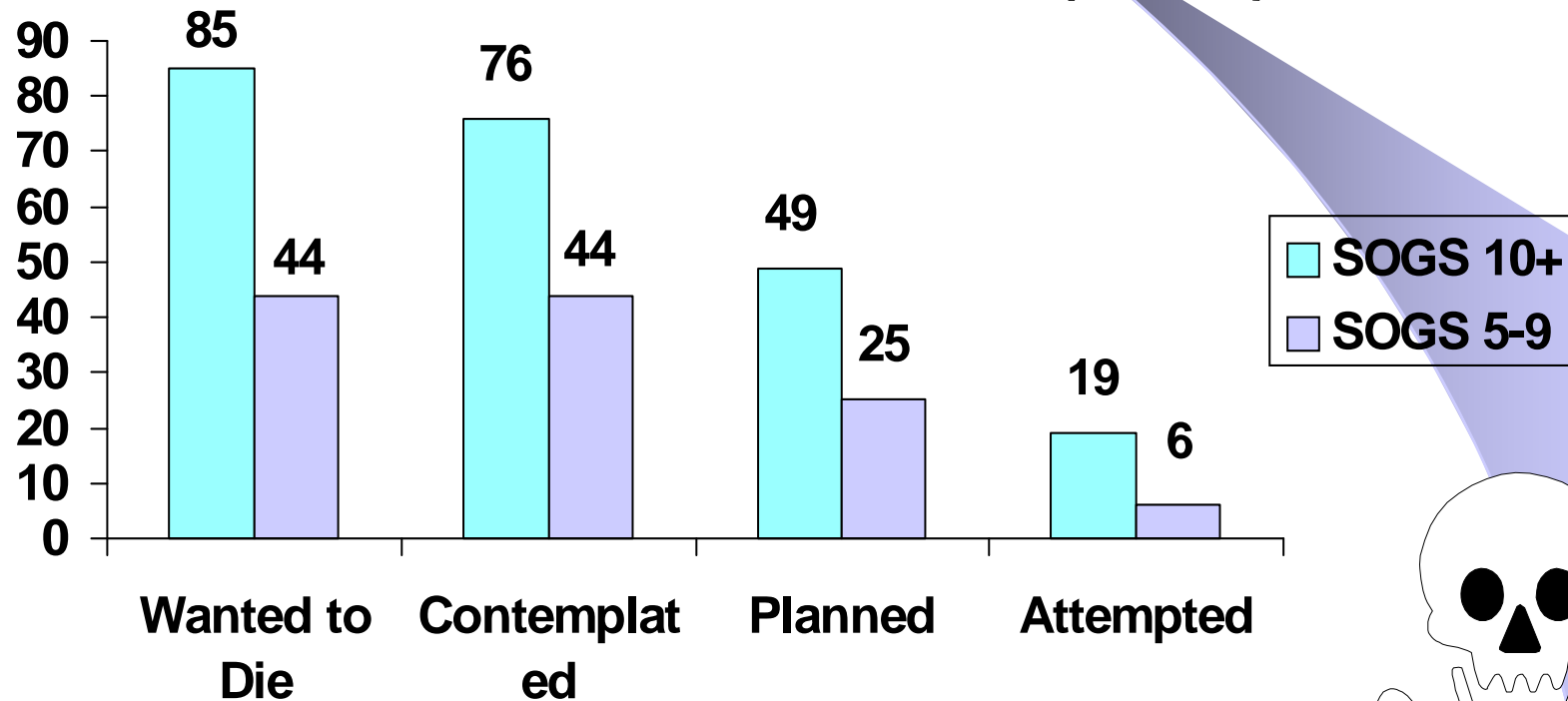
Thought of Suicide

Attempted

Source: Kaplan & Davis, 1997 Addictions Foundation of Manitoba



Suicidal Ideation of Pathological Gamblers by SOGS Score (Pct)



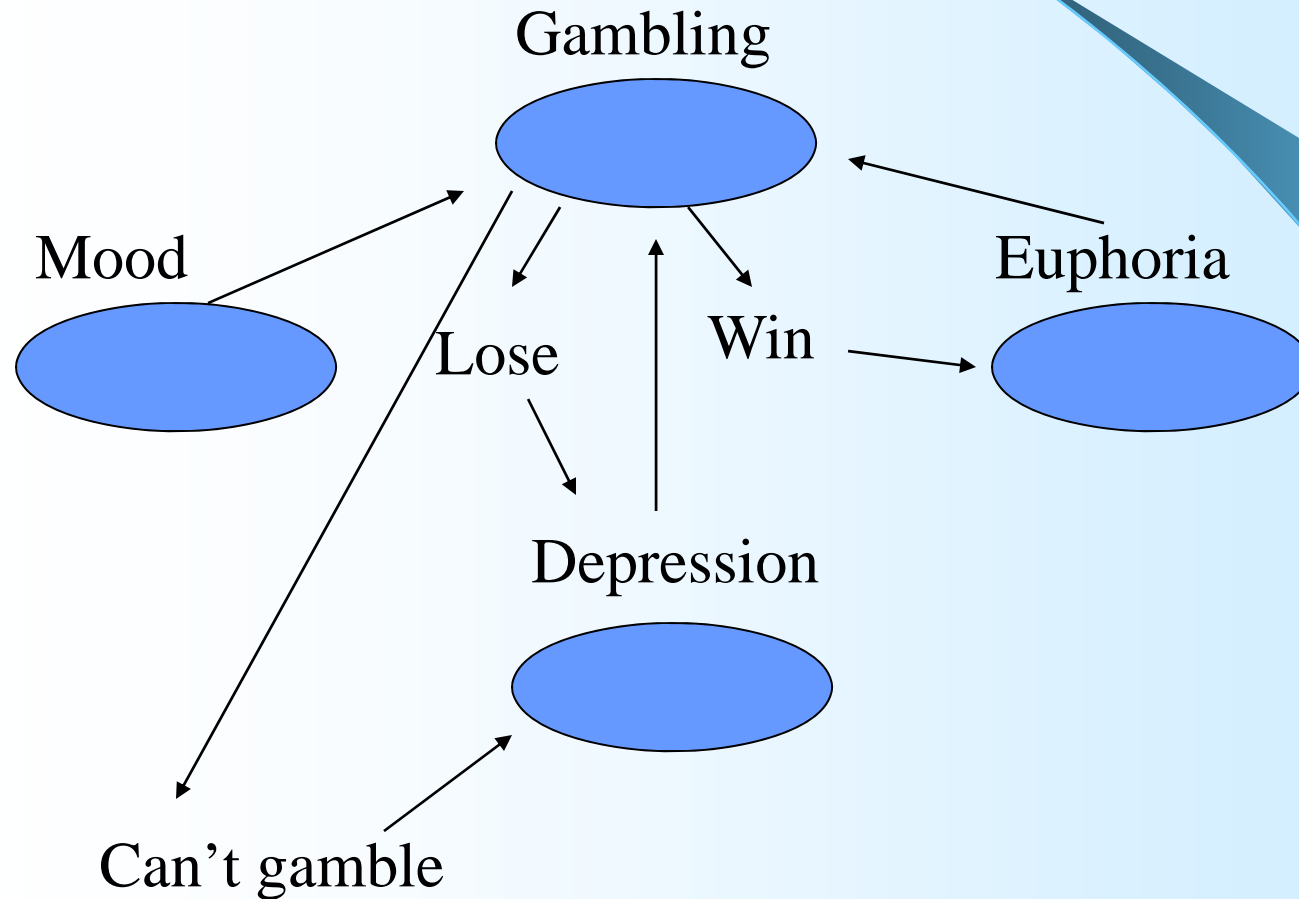
Extended Assessment (Maurer)

1. Assess Alcohol/Drug Use

2. Assess Need for Medication

- **lethargic? manic? schizophrenic?**
- **best not to make referral too soon unless disabling (if in doubt, refer)**
- **educate about gambling-related depression**
- **withdrawal may mimic depression**
- **differential diagnosis issues**
- **revisit suicidal/homicidal ideation (refer if yes)**

Problem Gambling and Mood Disorders



Extended Assessment (Maurer)

Hospital referral

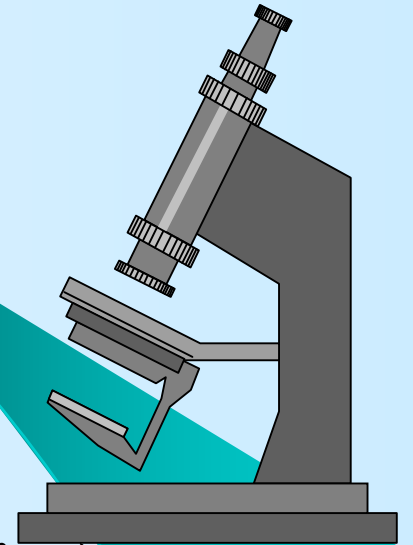
A. Detox (if actively using drugs will relapse)

B. Inpatient Psychiatric

- **Actively suicidal/ homicidal**
- **Floridly manic (evidence apart from gambling)**
- **Psychotic (not just confusion and disorientation produced by gambling difficulties)**

C. Inpatient Gambling Program (none locally available)

- **Needs safe environment to avoid illegal acts**
- **Outpatient treatment failure**



Extended Assessment (Maurer) continued

Issues to Avoid Early in Treatment

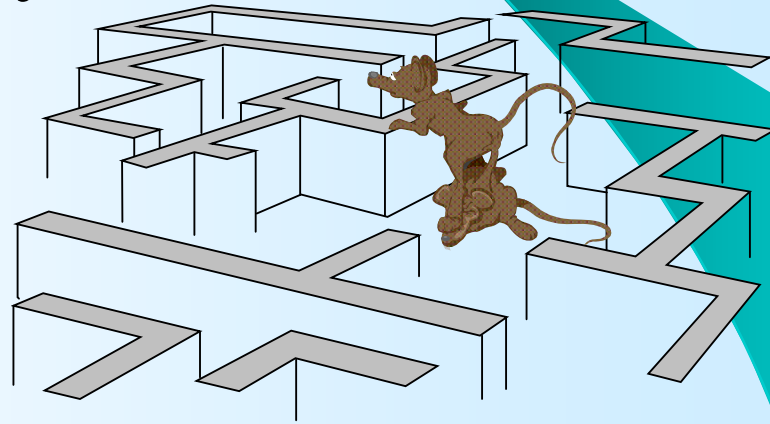
A. Early Life Issues

B. Trauma

C. PTSD

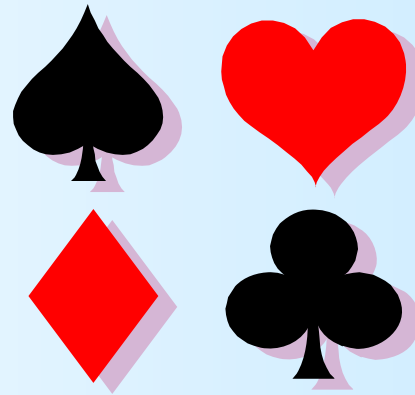
D. COA / COCG issues

**E. Harm to Children (may promote excess guilt) –
unless needed to motivate client**

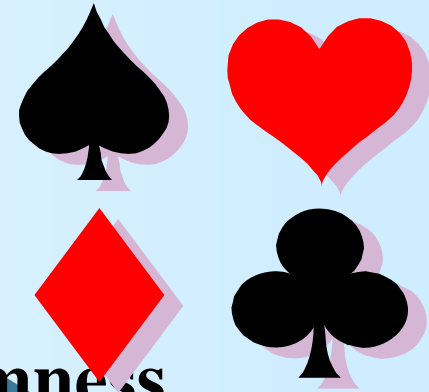


The Basic CBT Model

- **Motivational interviewing -- Join with the patient – Discuss stages of change and find ambivalence**
- **Costs-Benefits**
- **Triggers**
- **Experience Cycle**
- **Leisure Activities**



Basic CBT Model cont'd

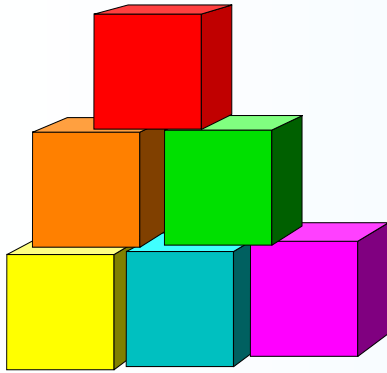


- **Randomness, randomness, randomness**
- **Safe@Play (for slots players and as relapse prevention)**
- **Gambling specific cognitive distortions – use GABS, T-BAGS, etc. (zero in on their gambling preferences)**
- **Relapse prevention**
 - **Planning, planning, planning**
- **Schema questionnaire and schema focused therapy**

RIGTP Treatment Guidelines

Motivational Interviewing-- “Meet ‘em where they’re at”

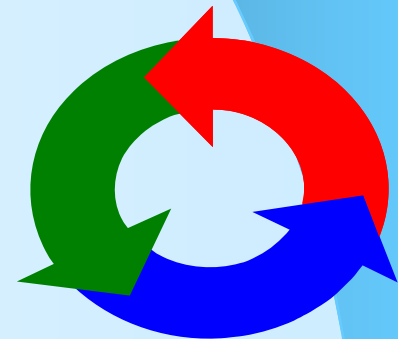
- **why are they seeking treatment NOW?**
- **how ambivalent are they?**
- **let them know they are not alone/crazy**
- **discuss how people change (Stages of Change)**
- **assess THEIR goals**
- **ACCEPTANCE: un-manageability, \$\$**



Stages of Change

Prochaska & DiClemente

- Precontemplation-- Resisting Change
- Contemplation -- Change is Needed
- Preparation -- Ready for Change
- Action -- Time to change
- Maintenance -- Continue Change
- Relapse -- What did person learn?

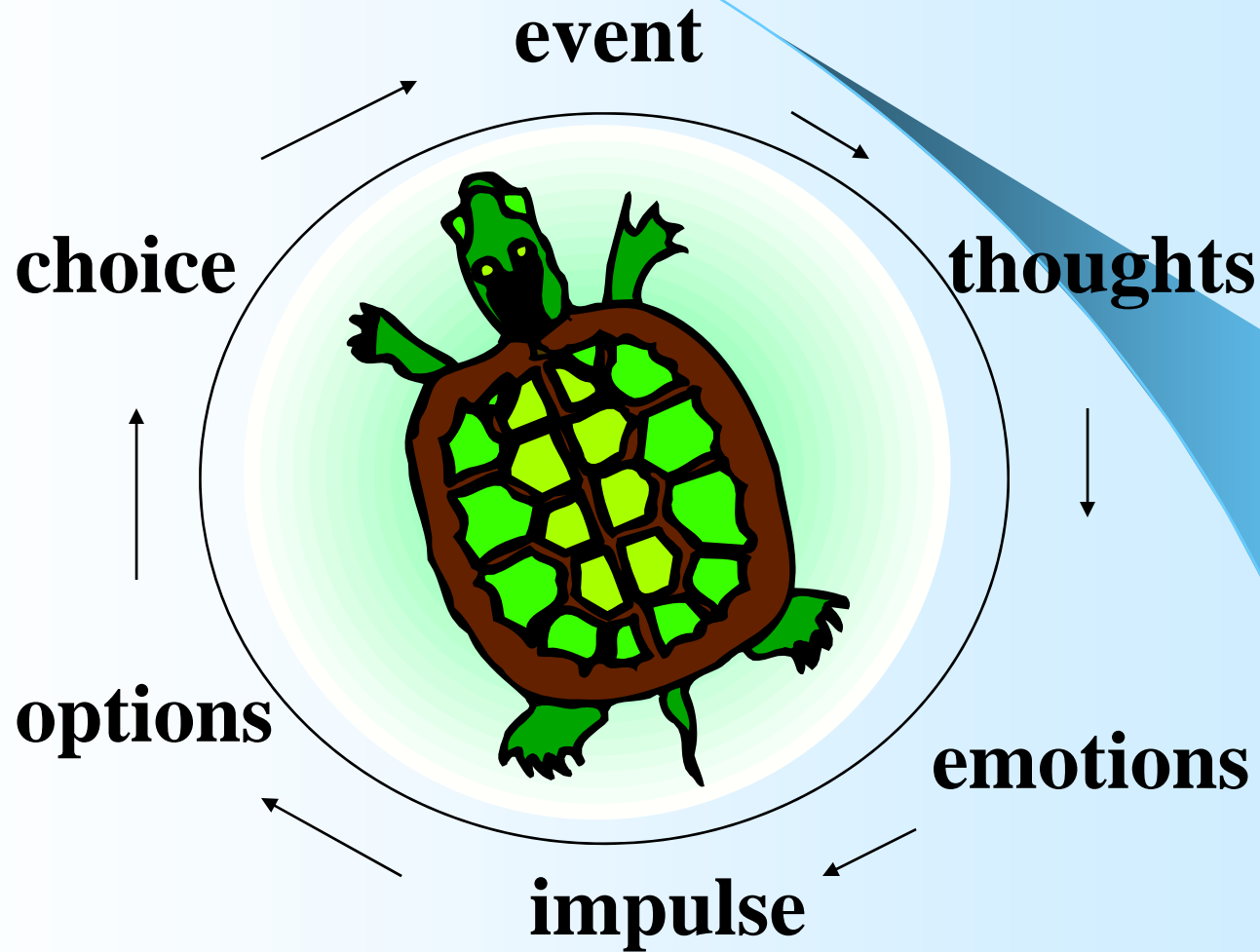


RIGTP Treatment Guidelines

Cost/Benefit Analysis

- **consequences/benefits of changing or not changing**
- **write it down!**
- **resisting urge to gamble: delay 15 minutes, review C&B, make decision**
- **Understand triggers**

Coping Skills “The Experience Cycle”



Conduct Behavioral Analysis Using Experience Cycle

- Events
- Thoughts
- Feelings
- Impulses – TURTLE – stop...breathe...think for 15 minutes then decide
- Options – what options are there for dealing with the situation? Get them to list at least 8 options using a pie chart
- Choices – be rational, logical, recognize consequences

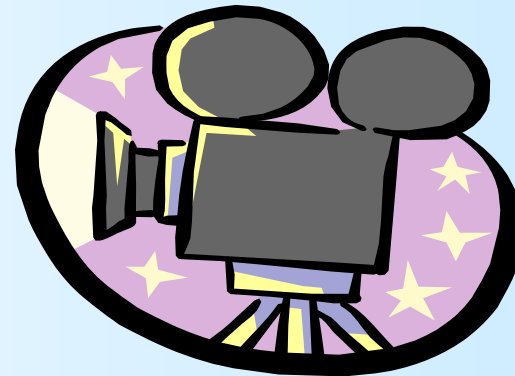
Early Treatment Guidelines

You're not gambling, now what?

- **Leisure Activities**
- **Make Plans for free time**
- **Involve family/friends: “coming clean”**
- **Relapse Prevention**

Leisure Activities

- Non-gambling
- Non-substance using
- Inexpensive (videos at library; reduced price cinemas)
- Focus on time when they typically gambled
- Increase social contact
- Alternative activities



Cognitive Focus

- **Gambler's Irrational Beliefs**
- **“Suck the fun out of it”**
- **How random events dictate outcome**
- **slot machine tutorial**
- **While I am speaking about slots, the focus on rational thinking also applies to horses, scratch tickets, sports betting, Blackjack, roulette, poker, etc.**

Safe@Play Slots Tutorial

Normal Play

The **safe@play** Slot Machine tutorial

Go ahead, play the slot machine. Then check out the menu items below.

Normal Play

- Options
- About us
- Inside General**
- Primer
- Inside Advanced
- Be safe@play
- Exit

| | 1 ST COIN | 2 ND COIN | 3 RD COIN |
|-------------|----------------------|----------------------|----------------------|
| 7 7 7 | 250 | 500 | 750 |
| BAR BAR BAR | 75 | 150 | 225 |
| Any 2 | 12 | 24 | 36 |
| Any 1 | 8 | 16 | 24 |
| | 2 | 4 | 6 |

ACCEPTS \$5, \$10, \$20, \$50, \$100

INSERT BILLS

PAYLINE

WINNER PAID: 00000000

CREDITS: 00000000

\$100

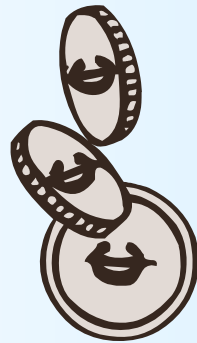
COINS PLAYED: 0

CASH OUT BET ONE SPIN BET MAX

Start | GAMBIB.do... | SOGSms.d... | NEConferen... | Slots | 1:07 PM

Changes for Dual Diagnosed Clients

- **More sessions needed because of complex PG**
- **Need to be flexible about progress through the CBT model**



Structure of the Session -

1



- **Any pressing issues this week? (set aside time)**
- **“Any gambling?” “any Powerball?” etc.**
- **“Any alcohol?”**
- **“Feeling depressed/suicidal?”**
- **If suicidal – focus on instilling hope; assess risk**
- **Experience cycle for gambling, alcohol, etc.**
- **CBT for depression, anxiety, assertiveness, etc.**

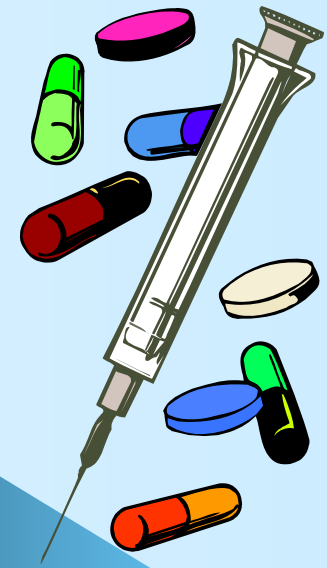
Structure of the Session

- 2



- **Ask about GA, AA, NA meeting attendance – steps; sponsor**
- **Ask about homework and go over it**
- **Discuss new topic.**
- **Introduce new topic or decide to continue old topic next session; assign homework**

Psychotic Disorders



- **Medication management**
- **Double stigma, increased shame**
- **CBT therapy after medication is managed; offer alternative explanations**
- **May need a payee if buying scratch tickets**
- **Family involvement when possible**
- **Assess Ability to participate in GA**

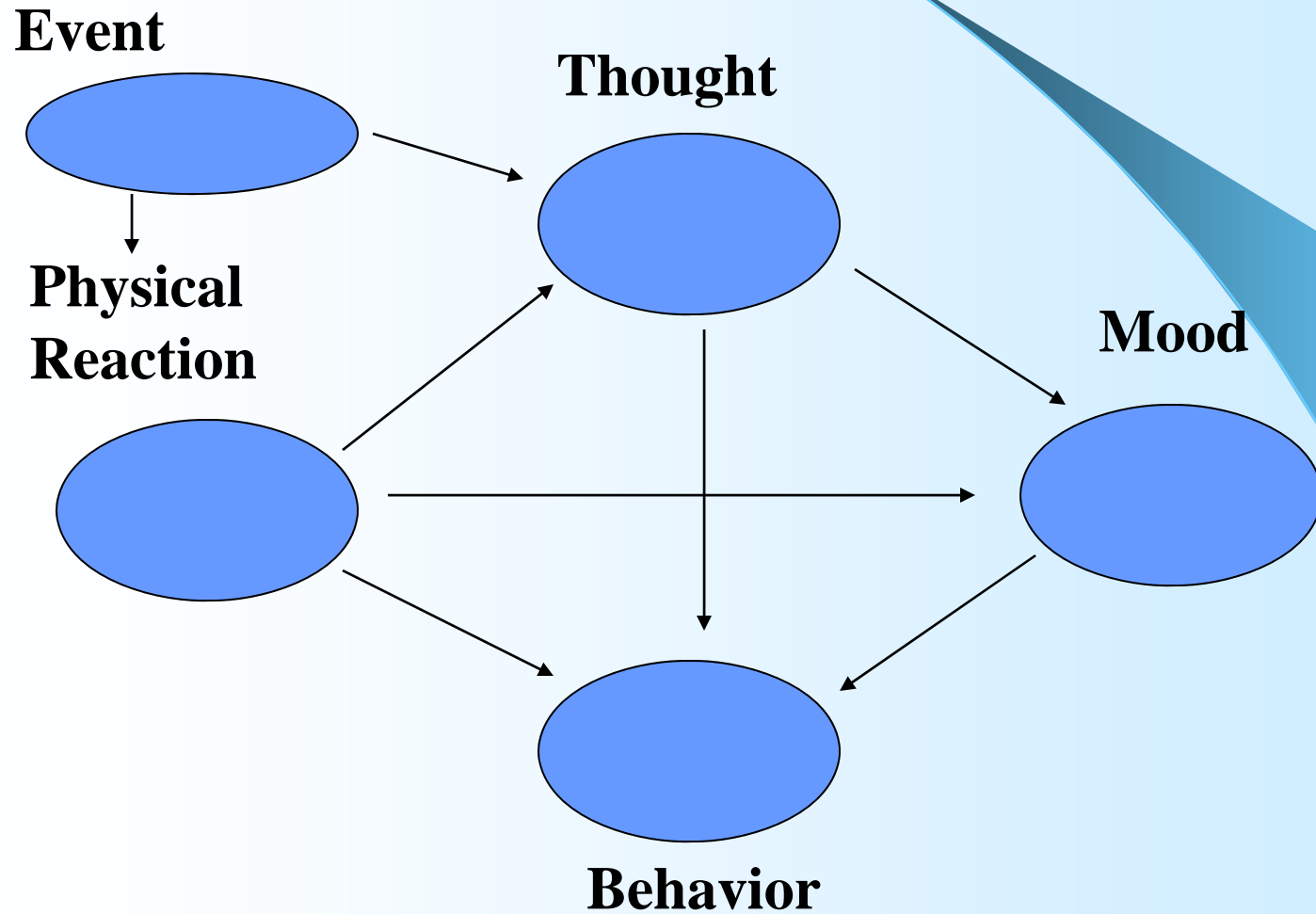
Depression

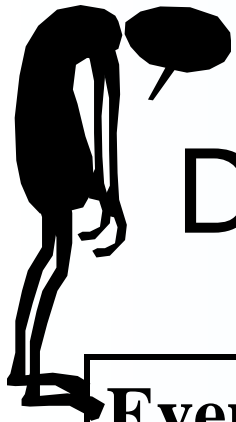


- **CBT oriented**
- **First focus on suicidality (thoughts of death, suicidal ideation, plans, attempts) – Do not focus on cost/benefits of gambling until stable**
- **Activity – get the person active – move leisure activities up sooner**
- **Discuss CBT model and separate out thoughts, feelings, and behaviors**
- **Get person to identify how she/he thinks**

Mind over Mood

D. Greenberger & C. Padesky



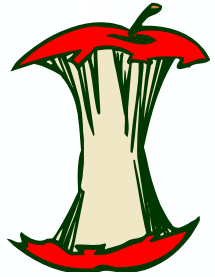


Distressing Thought Record

| Event Who, what, when, where | Mood 0-100 | Automatic Thoughts (Images) | Evaluate evidence supporting hot thoughts |
|---|---|--|--|
| Deceased Mother's birthday | Lonely; Depressed 70/100 | I'll always be alone. I can't stand it. | |

Recording Thoughts and Types of Thinking Errors

| <u>Thoughts</u> | <u>Thinking Errors</u> |
|---|---|
| <p>I will always be alone.</p> <p>I'm a piece of shit.</p> <p>She thinks I'm stupid.</p> <p>I should have a new house.</p> <p>Etc.</p> | <p>“All or nothing thinking” as well as “fortune telling”</p> <p>Labeling.</p> <p>Mind reading.</p> <p>“Should” statements</p> <p>Etc.</p> |



CBT focus on Core Beliefs and Life Schemas

- **Need to challenge core beliefs**
- **E.g. “If you don’t have money you are a nobody.”**
- **“If my house is not neat that means I am a slob.”**
- **“The world is a dangerous place and you have to always be on your guard.”**
- **“If I fail that is because I did not work hard enough.”**
- **“If I ask someone to do something for me and I do it, that means I am weak.”**

Bipolar Disorder



- **Medications need to be stabilized first**
- **In contact with psychiatrist**
- **Monitor bipolar symptoms weekly**
- **MIND over MOOD interspersed with CBT for gambling**
- **Monica Basco The Bipolar Workbook – CBT for bipolar disorder**

Dealing with Anxiety

- **Gambling is a SAFETY BEHAVIOR that increases anxiety**
- **Relaxation exercises; diaphragmatic breathing; progressive muscle relaxation; guided imagery (peaceful place); mindfulness**
- **CBT focus (mind over mood)**
- **Hypnotic exposure using SUD hierarchy – only after gambling under control for 2 months or more (6 months if anxiety severe)**





PTSD



- **Relaxation training and CBT**
- **Grounding and mindfulness to help with focus**
- **Exposure oriented therapy only after PG is stable; especially so for complex PTSD.**
- **Use Mindfulness & DBT for complex PTSD; hypnosis very is useful**

ADHD



- **Very high rates among PGs**
- **Do not do homework (often lose it)**
- **Forget appointments**
- **I give them pads to write things down**
- **Emphasize the turtle**
- **Structure, visual information, structure**
- **Kohlberg & Nadeau ADD-Friendly Ways to Organize your Life – excellent resource**

Personality Issues

- **Schema Focused Therapy – Jeffrey Young**
- **Combines CBT with Transtheoretical Model (variety of psychodynamic therapies)**
- **Reinventing Your Life J. Young & J. Klosko – discusses Lifetraps**



Lifetraps



- **Abandonment**
- **Emotional Deprivation**
- **Mistrust/Abuse**
- **Social Isolation**
- **Failure**
- **Defectiveness/Shame**
- **Subjugation**
- **Self-sacrifice**
- **Unrelenting Standards**
- **Insufficient self-control**
- **Entitlement**

See J. Young, J. Klosko & M. Weisharr (2003) Schema therapy: A Practitioner's Guide. Guilford Press.

Borderline Personality Disorder

- **I use a Dialectical Behavior Therapy focus**
- **A. Validate, validate, validate**
- **B. Problem Solving (gambling & other)**
 - **Mindfulness**
 - **Emotion Regulation**
 - **Distress Tolerance**
 - **Interpersonal Effectiveness**

The background is a light blue gradient. A thin, dark blue curved line starts from the top left and curves towards the center. A dark blue wedge-shaped area is located on the right side, pointing towards the center.

The Multi-Impulsivist Gambler.

**ASPD: A Problem without a
Solution?**

Antisocial Personality Disorder

- **Studies point to high rate (15%)**
- **Minimal evidence that this can be treated with individual therapy**
- **Can be highly destructive of group process**
- **Individual therapy is contraindicated but this has not been examined with PG**



Anger Management (e.g. damaged video machines)

- **Anger as Normal Emotion**
- **Physiology of Anger**
- **Stress Management**
- **Assertiveness vs. Aggression**
- **DEAR and other DBT interpersonal skills**
- **Importance of Validation**
- **DBT and CBT focus**
- **Role plays**



Now What?

- Instill hope



Further Information

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