



DSM, ICD, ASAM, GPPC, OMG !

**Taking the Disorder
out of Gambling Disorder**

**15th International Conference on Gambling & Risk Taking
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DIAGNOSTIC AND STATISTICAL
MANUAL OF
MENTAL DISORDERS

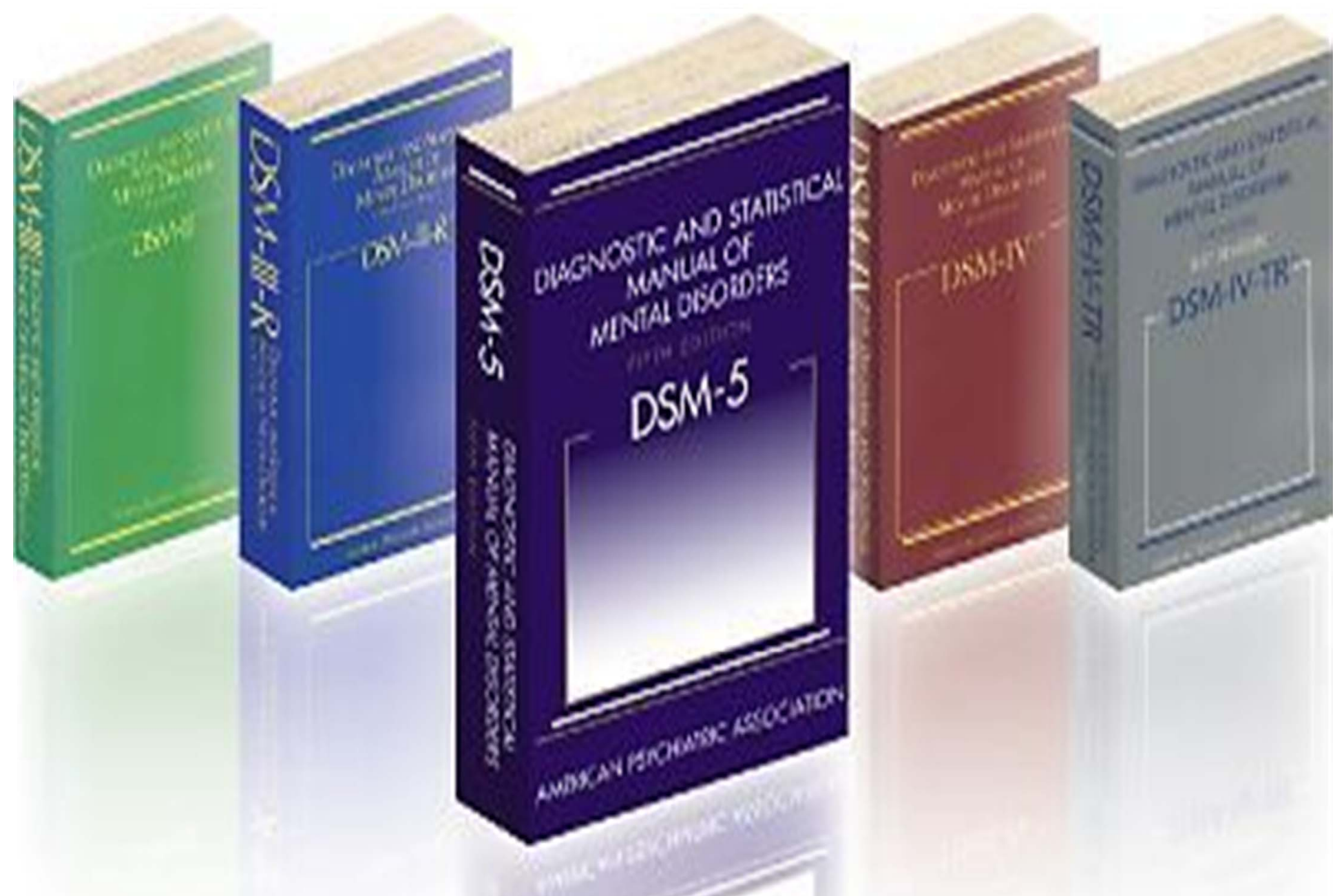
FOURTH EDITION

TEXT REVISION

~~DSM-IV-TR~~

5

No More
Roman numerals !



DSM-5 Gambling Disorder

A. Persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress, as indicated by four (or more) of the following in a 12-month period:

A. Persistent and recurrent maladaptive gambling behavior as indicated by five (or more) of the following:

Gambling Disorder

1. needs to gamble with increasing amounts of money in order to achieve the desired excitement

(2) needs to gamble with increasing amounts of money in order to achieve the desired excitement

2. is restless or irritable when attempting to cut down or stop gambling

(4) is restless or irritable when attempting to cut down or stop gambling

Gambling Disorder

3. has made repeated unsuccessful efforts to control, cut back, or stop gambling

(3) has repeated unsuccessful efforts to control, cut back, or stop gambling

4. is often preoccupied with gambling

(e.g., persistent thoughts of reliving past gambling experiences, handicapping or planning the next venture, or thinking of ways to get money with which to gamble)

(1) is preoccupied with gambling

(e.g., preoccupied with reliving past gambling experiences, handicapping or planning the next venture, or thinking of ways to get money with which to gamble)

Gambling Disorder

5. often gambles when feeling distressed (e.g., helpless, guilty, anxious, depressed)

(5) gambles as a way of escaping from problems or of relieving a dysphoric mode (e.g., feelings of helplessness, guilt, anxiety, depression)

6. after losing money gambling, often returns another day to get even (“chasing” one’s losses)

(6) after losing money gambling, often returns another day to get even (“chasing one’s losses”)

Gambling Disorder

7. lies to conceal the extent of involvement with gambling

(7) lies to family members, therapist, or others to conceal the extent of involvement with gambling

8. has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling

(9) has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling

Gambling Disorder

9. relies on others to provide money to relieve desperate financial situations caused by gambling

(10) relies on others to provide money to relieve a desperate financial situation caused by gambling

B. The gambling behavior is not better accounted for by a Manic Episode

B. The gambling behavior is not better accounted for by a Manic Episode

Gambling Disorder

Specify:

- Episodic
- Persistent

Specify

- Early Remission (3+, less than 12 mos.)
- Sustained Remission (12 or more mos.)

Gambling Disorder

- Mild (4-5) [(6)chasing, (4)preoccupation]
- Moderate (6-7)
- Severe (8-9) [(8)jeopardized, (9)relies]

Note:

- Gambling Disorder can be episodic or chronic, and the course of the disorder can vary by type of gambling as well as life circumstances (Hodgins & elGuebaly, 2004; Slutske, 2006).
- For example, an individual who wagers problematically only on football games may have Gambling Disorder during football season and not wager at all, or not wager problematically, throughout the remainder of the year.
- Gambling Disorder may also occur at one or more points in an individual's life but be absent during other periods. Alternately, some individuals experience chronic Gambling Disorder throughout all or most of their lives.

Differential Diagnosis:

Distinct from:

- Social and professional gambling
- Gambling in the context of a manic episode
- Problems with gambling in antisocial personality disorder
 - *If the criteria for both disorders are met, both diagnoses can be made*

ICD-10

The ICD-10 Classification of Mental and Behavioural Disorders

**Clinical
descriptions
and diagnostic
guidelines**



World Health Organization
Geneva

ICD-10 Classification

Mental and behavioral disorders (F01-F99)

- Disorders of adult personality and behavior (F60-F69)
 - Impulse disorders (F63)
 - Pathological Gambling (F63.0)

Excludes:

T1 – Gambling and betting NOS (Z72.6)

T2 – Excessive gambling by manic patients (F30, F31)

T2 – Gambling in antisocial personality disorder (F60.2)

ICD-10 Pathological gambling (F63.0)

- A. Repeated (two or more) episodes of gambling over a period of at least one year.
- B. These episodes do not have a profitable outcome for the person, but are continued despite personal distress and interference with personal functioning in daily living.
- C. The person describes an intense urge to gamble which is difficult to control, and reports that he or she is unable to stop gambling by an effort of will.
- D. The person is preoccupied with thoughts or mental images of the act of gambling or the circumstances surrounding the act.



THE ASAM CRITERIA

Treatment Criteria for Substance-Related, Addictive,
and Co-Occurring Conditions

American Society of Addiction Medicine
Third Edition, 2013





“The ASAM Criteria”

**Treatment Criteria for Substance, Addictive
and Co-Occurring Conditions**

Short Definition of Addiction

Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry.

Dysfunction in these circuits leads to characteristic *biological, psychological, social and spiritual* manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.

Short Definition of Addiction

Addiction is characterized by:

- inability to consistently abstain,
- impairment in behavioral control,
- craving,
- diminished recognition of significant problems with one's behaviors and interpersonal relationships,
- and a dysfunctional emotional response.

Like other chronic diseases, addiction often involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.

Modifications

- Additional text to improve application to Special Populations: Older Adults; Safety Sensitive Occupations; Parents with Children; Criminal Justice
- Section on working with managed care
- Shift away from “placement” only criteria to “treatment” criteria
- Diagnostic Admission Criteria compatible with DSM-5
- Changed terminology to be contemporary and strength-based; recovery-oriented.
- “dual diagnosis” becomes “co-occurring disorders”

ASAM Gambling Disorder

Similarities

- Preoccupation with the activity
- Loss of control
- Progressive
- Denial
- Continued despite adverse consequences
- Tolerance
- Urges/cravings
- Withdrawal symptoms
- Different forms/different addictive potential?
- Psychological escape, self-medication and avoidance
- Associated illegal acts to fund addiction
- Episodic, chronic, in remission

Differences

- No objective testing procedure
- “Hidden;” delayed effect
- Overdose; self-limitation
- Suicidality
- Financial crises
- Less public awareness/acceptance
- Fewer Tx resources
- Limited reimbursement for Tx

Gambling Patient Placement Criteria GPPC®

A Guide to Placing Problem Gamblers
at the Optimum Level of Care



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College of Business
University of Nevada, Reno

Gambling Patient Placement Criteria – GPPC™



The GPPC®

- Screening & Assessment Vignettes
- Levels:
 - 0.5: Early Intervention Svcs
 - 1: OP Services
 - 2: IOP Services
 - 3: Residential Services
- Family & Legal Issues
- Tx Planning and Tx
- Modules
 - Manual, Templates
 - S&A Instruments
 - Completed Examples
- Charts
- Preliminary Data
- References
- Bibliography & Recommended Reading
- CD ROM

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