

Speaker

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Title

Adolescents, adults and their families seeking help for gambling problems in Stockholm 2004 - 2009; Experiences from treatment programmes and how to go on in the future.

Background

Pathological gambling is a widespread problem with major implications for society and the individual. Several socio demographic factors as well as comorbid psychiatric disorders have been associated to an increased risk of developing gambling problems. To better understand developmental trajectories, more research is required on aspects associated with gambling problems. There are effective treatments, but little is known about the relative effectiveness of different treatments. To learn more about adolescents and adults with gambling problems and to test the effectiveness of motivational interviewing (MI) and cognitive behavioural therapy (CBT), Swedish Public Health Institute started collaboration with outpatient units at Stockholm Dependency Centre.

Aim

The aim of this presentation is to describe gambling-habits, psychiatric comorbidity and socio-demographic conditions among adolescents and adults seeking help for gambling problems. The aim is also to describe the relative effectiveness of MI and CBT in the treatment of problem gambling as well as to discuss development and implementation of future treatment programmes for problem gamblers and their families.

Methods

Data has been collected from a set of self-report measures. The adolescents also has been assessed via the Structured Clinical Interview for DSM axis I Disorders (SCID-I) in order to establish pathological gambling as well as comorbid psychiatric disorders. In a trial a total of 127 adults suffering from gambling problems were randomized to 4 individual sessions of MI, 8 sessions of CBT group therapy or a no treatment control (wait list). Gambling related measures derived from NORC DSM-IV Screen for gambling problems and time-line follow-back, as well as general levels of anxiety and depression was collected at baseline, post treatment, and at 6 and 12 months follow-ups.

Results

More than 30 young individuals and 200 adults seeking help for gambling problems have been assessed. Treatment of adults showed superiority in some areas over the no treatment control in the short term, including the primary outcome measure. No differences were found between MI and CBT at any point in time. Instead both MI and CBT produced significant within-group decreases on most outcome measures up to the 12 month follow-up. However, there was a clear difference in the cost of treatments. MI was four times as cost-effective as the CBT treatment.