











UP TO DATE EVIDENCE-BASED APPROACHES FOR TREATMENT OF POLICY MAKING FOR ADDICTIVE BEHAVIORS DESIGNING FIT-FOR-PURPOSE RESPONSE PROGRAMS

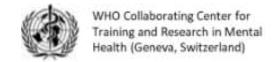
Dre. Sophia Achab, MD, Spec, MSc, PhD, CC,

Deputy Head of Addiction Division, Head of ReConnecte Specialized Program, Addiction Division, Department of Psychiatry, HUG Director, WHO Collaborating Center for Research and Training in Mental Health, Department of Psychiatry, University of Geneva Expert in Problematic Internet Uses for the Swiss Federal Office of Public Health and for WHO BOD. ISAM and ISSBA

Chair, Addiction Section, EPA

Executive Committee, Addiction Section, WPA









Declaration of Financial Interests or Relationships

I have no financial interests or relationships to disclose regarding the subject matter of this presentation.

Mental and Behavioral Disorders:

Some types of PUI, such as gambling and Gaming disorders, are recognized as mental and behavioral disorders in ICD-11.

Others, such as compulsive buying or problematic use of social media, can also be considered disorders due to addictive behaviors.

The rational lies in:

- the health system users needs
- clinical practice, aim to improve the identification and treatment of affected individuals.



Reed, First, Billieux, Cloitre Briken, Achab, Brewin, King et al.

World Psychiatry 2022

New care needs- heterogeneous responses

A first review found that:

- Health systems globally have been challenged 2 decades ago by emerging care needs related to Internet maladaptive patterns of use, from:
 - Individuals
 - Relatives
 - Care professionals
 - Social workers
- Their response has been heterogeneous from one jurisdiction to another.



Global trend in identifying Problematic Internet Use (PIU)

Review of the cross-cultural representation trend of PIU underlying epidemiological studies globally (2000-2014): 88 identified research papers,

Continent	Epidemiological efforts and targets	Underlying concept
Africa	1 study, technology magazine readers,	PIU is investigated as a problem
America	4 epidemiological studies were conducted between 2001 and 2012 mostly in University students	PIU being stably considered through time as an addictive disorder
Europe	24 studies, showed large epidemiological interest between 2004 and 2013, majority on adolescents, school, online or phone-based recruitment	Initial representation of the PIU was that of a pathology (37%), and later and in a stable manner but not exclusively, PIU has been considered as an addiction (50%)
Asia	56 studies from 2003 to 2013, mostly children and adolescents, school-based recruitment	Considered the issue massively (77%) as an addictive disorder and to a lesser extent (10%) as a pathological use or as a behavioral (impulse control, compulsion) or a cognitive disorder

Variability in epidemiological studies over the globe resulted from

- biases in sampling (mostly adolescents and students),
- having guided the choice of the assessment tool (as an addiction, as an impulse control disorder, as a pathology, as a problem, as a stress factor, as a cognitive or compulsive disorder), and in
- the differences in the Internet availability and speed

Digital infrastructure Penetrance of the Internet Medical culture Concepts underlying the health

response

<u>Achab</u> et al 2015. Challenges and trends of identification and treatment of disorders associated with problematic use of Internet.

Need Better informed Policy and Health systems' response

- Critical psychometric properties :
 - Disparity of screeners
 - Samples (youth >>adults)
 - Miscellaneous underlying theoretical construct
- Heterogeneous conclusions ➤ Results:
 - Not generalizable
 - ➤ Not cross-comparable
 - > Not supporting efficient public health decision making
 - Not providing landmarks for medical decision-making

Organizational models -Health system structure and governance

Country	Treatment offer within the Health system	Type of offer
A51	-Mental health centers, addiction treatment centers and some general hospitals -Few leading universities and research institutions -From 2011, few private institutions	-United medical services for ICT -Hotline counseling -More comprehensive treatments, including psychological counseling, drug treatment, and controversial therapies (paramilitary training and/or aversion therapy), and physical punishment
AS2	Since 2011, first specialized treatment. Non specialized, pediatricians, psychiatrists	-Outpatient care -Treatment camps -Counselling
A\$3	-No designated medical treatment services in public hospitals. If comorbid psychiatric conditions, the case may be referred to the general psychiatric service -from government Organisations since 2012 integrated Centre on Addiction Prevention and Treatment	-Outpatient care
AS4	Since 2014, individual institutions have developed their own clinics and programs	Healthy use of technology Clinic Behavioural Addiction Clinic at premier medical institute in the country
AS5	Psychiatry and mental health services in Malaysia are providing help to those with behavioural addiction	Existing help-seeking pathway

Country	Treatment offer within the Health system	Typn of offer
ME1	General or child psychiatrists Psychologists Counsellors	Occasionally clients with excessive use of internet, gaming and social networking, Iranian National Center for Addiction Studies (INCAS) has established a Department on Behavioral Addiction and is planning to faunch a clinic
ME2	No formalized treatment available	NRC interested in the future
AU	Policy and program responses small scale and fragmented The Victorian Government Department of Health and Human Services raises the debate about whether Internet addiction really exists	Public treatment services do not commonly offer treatment for excessive internet and gaming use if it is not related to a substance use disorder.

A second review undertaken by WHO on health systems response globally to these new disorders, consisted in national case studies that showed

- a disparity or lack of specific care response,
- even in continents with major public health concern about maladaptive use of Internet including Gaming

Country	Treatment offer within the Health system	Type of offer
EU1	In 2007 the first specialized service Generalist services mental health and SUOs facilities	Outpatient program devoted to the evaluation and treatment of internet and gambling-related disorders
EU2	In 2015 the first specialized service Generalist services	Outpatient program devoted to the evaluation and treatment of internet and gambling related disorders
EU3	No formalized treatment available	
AM1	In 2013 the first specialized clinic	in-patient, residential, private
AM2	in 2006 the first specialized clinic	Impulse control disorders outpatient psychiatric
AM3	No formalized treatment available	Outpatient centres or individualized mental health practitioners.

Economics- Health costs

ASIA

"The main challenge in the development and implementation of program responses is sufficient financial support to start and sustain responses"

AMERICAS

"A current concern in ... is that given the absence of ICD codes for Internet-related disorders, they are typically not covered by insurance, and thus many people may need to pay privately for treatment"

Economic factors played a major role in this disparity, be it (1) the lack of financial support for care response or..

Economics Industry competing interests

- Social networks
- e-Sports...



Comment on the global gaming industry's statement on ICD-11 gaming disorder: a corporate strategy to disregard harm and deflect social responsibility?

Daniel L. King Gaming Industry Response Consortium

First published: 14 July 2018 | https://doi.org/10.1111/add.14388 | Citations: 31

..(2) competing economic interests to the needed policy-making to protect the most vulnerable individuals from harms to their psychosocial and physical well-being

Mapping policies related to Problematic Use of the Internet in seven European countries: Netherlands, Spain, Hungary, Lithuania, Portugal, Estonia and Switzerland

Blanca Larrain PhD¹, Robin van Kessel PhD²,⁴, Sophia Achab¹⁵,¹6,n, Dan J. Stein⁵, Hamed Ekhtiari, Marc Potenza³-¹⁴, Jose Menchon², Konstantinos Ionnadis¹9-²0, Ornella Corazza¹¹⁻-¹8, Henrietta Bowden-Jones¹, Hans Jurgen Rumpf²¹, Natalie Hall¹¹, Christian Montag²², Matthias Brand²², Julius Burkauskas⁶, Naomi Fineberg®, Andres Roman-Urrestarazu MD PhD¹,²,5°

Switzerland

In general, the Swiss policy approach focuses on a secure digital space as well as relevant market regulation, ensuring the protection of individual rights and ensuring secure digital interactions.

This indirectly contributes to public health by promoting responsible use of the Internet and reducing vulnerabilities associated with IPU.





The Lancet Psychiatry Commission

The Commission aims to provide evidence-based recommendations to improve health practices and advance health policy globally.

It will involve a multidisciplinary panel of experts and an advisory group including people with lived experience of the PUI.

The aim is to set a clear agenda to guide the development and delivery of evidence-based health and social care for those affected by digital harms and to reduce digital technology-related harms at the population level through public health measures, regulations, and preventive or therapeutic interventions.

Up-to-date evidence on health systems and policy responses towards PUI- Global survey 2024

ISAM Behavioral Addiction Interest Group (ISAM-BIG)

ISAM-GEN Problematic Use of Internet (PUI) Working Group

Steering Committee



Sophia Achab (Switzerland)



Alex Baldacchino (Scotland)



Henrietta Bowden-Jones (UK)



Zsolt
Demetrovics
(Hungary)



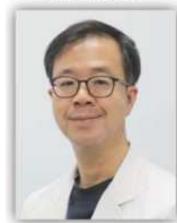
Hamed Ekhtiari (USA)



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Hae Kook Lee (South Korea)



Marc Potenza (USA)



Dan Stein (South Africa)



Kristiana Siste (Indonesia)



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Arash Khojasteh Zonoozi (Officer - Iran)



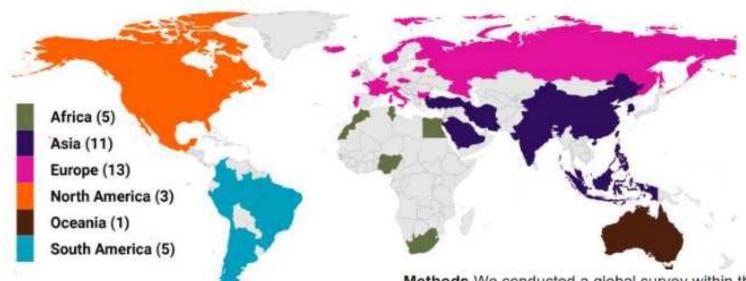


Health Response to Problematic Usage of the Internet: A Global Survey on Trends, Available Treatments and Key Challenges

© Arash Khojasteh Zonoozi, © Joe Schofield, © Fateme Sadat Abolghasemi, © Sophia Achab, © Henrietta Bowden-Jones, © Zsolt Demetrovics, Mohsen Ebrahimi, © Naomi Fineberg, © Yasser Khazaal, Hae Kook Lee, © Kristiana Siste, © Dan J Stein, © Anise M.S. Wu, © Mehran Zare-Bidoky, ISAM-GEN Societies' Experts, © Marc N. Potenza, © Alexander Mario Baldacchino, © Hamed Ekhtiari doi: https://doi.org/10.1101/2025.05.20.25327972

This article is a preprint and has not been certified by peer review [what does this mean?]. It reports new medical research that has yet to be evaluated and so should not be used to guide clinical practice.

Participating Addiction Societies

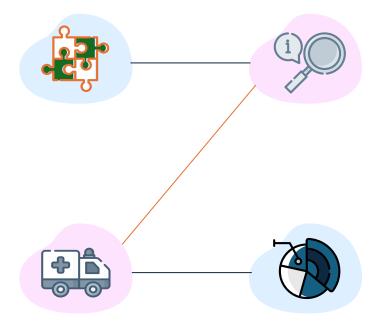


Methods We conducted a global survey within the International Society of Addiction Medicine's Global Expert Network (ISAM-GEN), involving addiction societies from 38 countries across Europe (13), Asia/Oceania (12), the Americas (8) and Africa (5). Response to PUI was assessed across various domains, including non-specific PUI and problematic online gaming, problematic online gambling, problematic online pornography, problematic social media use and problematic online buying/shopping. The survey structure included sections on six case scenarios representing different PUI subtypes, each followed by targeted questions, along with an evaluation of the significance of PUI, country-level health responses to PUI and the perceived severity of specific PUI subtypes.

SURVEY STRUCTURE

Scenario-based

Prevalence, care provider, treatment options



PUI Importance

Interest groups, training programs, R&D, certification, etc.

Health response

Prevention, screening, awareness, & treatment programs

Branches severity

Online gaming, gambling, shopping, pornography & social media use

Under Review, 2025

Four main sections, starting with 6 scenarios on the 5 domains of PUI previously found in our MA+ general PUI. We assumed that putting these scenarios at the beginning of the survey would familiarize our audience with the concept we are surveying on and helps them for the following sections as well. We then asked questions on **PUI importance**, **country-level health response toward PUI**, and the **severity of distinct PUI** branches.

Khojasteh, Schofield, Sadat, Achab et al.

PUI Scenario-based Questions



Alma

General problematic use of intended



Problematic online shopping



Reza ematic on

Problematic online gambling



Chloe

Problematic social media use



Sara

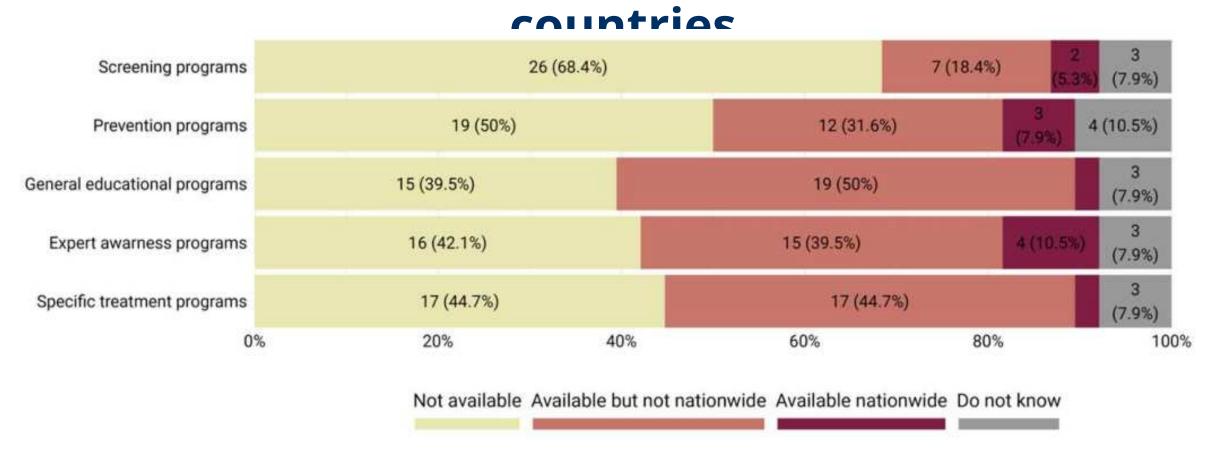
Problematic online gaming



Griffin

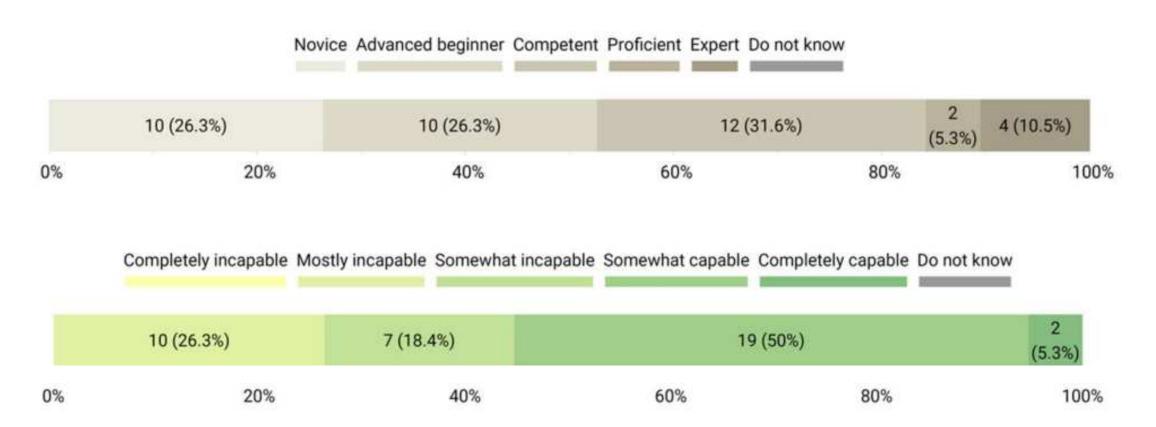
Problematic online pornography

Available programs around PUI across



Psychotherapeutic approaches, such as **cognitive behavioral therapy**, were identified as the **most widely available** treatments for PUI, accessible in over **70% of countries** surveyed.

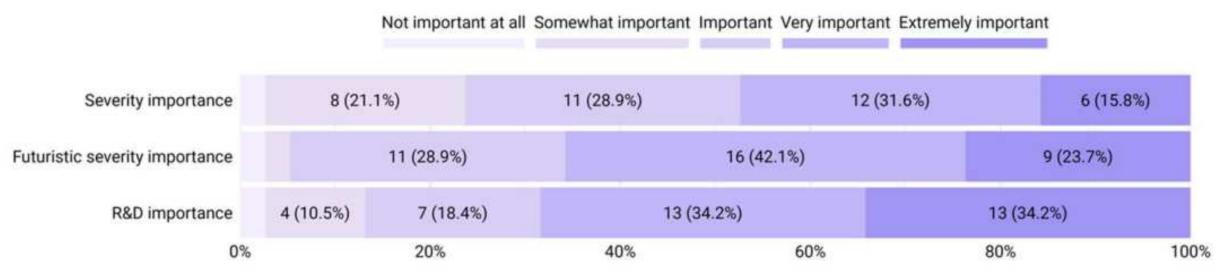
Expertise of addiction workforce & health system capability towards General PUI



More than **50** % of the societies have reported that the **addiction workforce is at least competent** towards managing this scenario.

This is while it appears that the **health system** between the countries is reported to be **somewhat incapable** as reported **by 44** % of the respondents.

Perceived PUI Severity & Research Development Importance

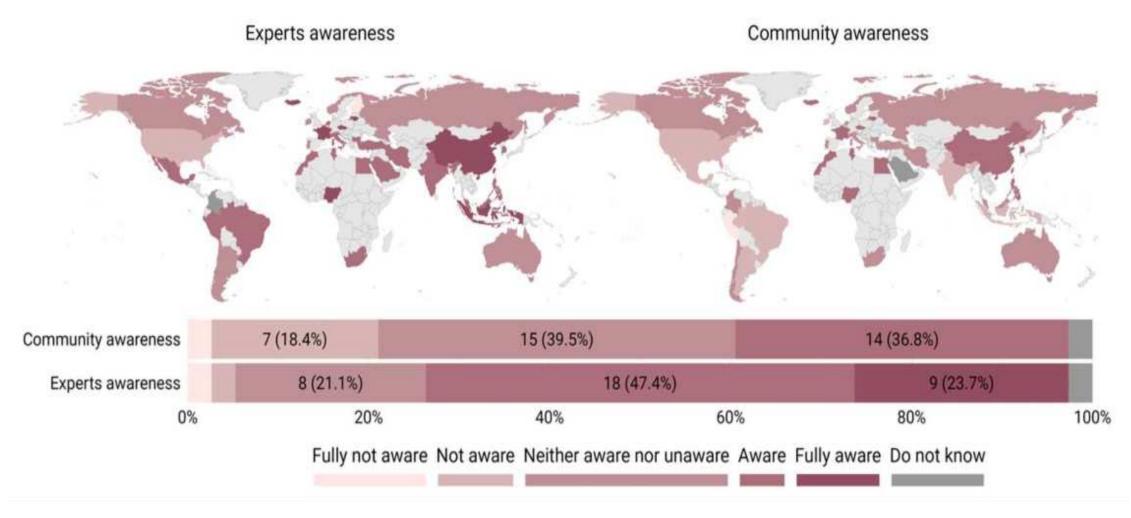


Despite **increasing global attention to PUI**, reflected in the establishment of PUI-focused interest groups in 44.7% of the surveyed societies, **significant gaps** remain.

These gaps include the **absence of professional certifications**, reported by 78.9% of societies, **insufficient educational plans for practitioners** (68.4%) and a **perceived lack of expert training programs** (63.2%).

Such deficiencies are concerning given that **65.8% of societies emphasized the projected 10-year severity of PUI** as either **extremely or very important**.

Awareness around PUI



More than **70**% of societies believe that there is a **sufficient level of awareness among addiction experts** while this appears to be **less among the general population.**

Findings highlight the **global importance of PUI** and suggests **critical gaps in healthcare** responses.

The disparity between awareness of PUI's significance and the limited resources to address it warrant urgent interventions internationally.

Future efforts should focus on **enhancing training programs** and **investing in sustainable solutions** to **monitor and mitigate** the growing burden of PUI worldwide.





Centrale nationale de coordination des addictions

△ / TROUVER DE DAIDE / CONSULTATION RECONNECTS.





Consultation ReConnecte Ancien Programme NANT

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- € +41 22 372 57 50
- https://pro.addictohug.ch/reconnecte/
- Reconnecte⊕houge.ch



Patient-centered and personalized approach to Addictive Behaviors

Addictive behaviors (gambling, video games, shopping, or social media) require a nuanced and personalized approach.

Here's how PCM can be applied:

- Initial Comprehensive Assessment that takes into account the addictive symptoms, and the psychological, social and environmental aspects of the patient.
- Personalized Care Plan in collaboration with the patient, which includes realistic goals and adapted strategies.
- Ongoing support and regular follow-up to help the patient overcome challenges and maintain progress.
- Identification and strengthening of the patient's Internal Resources, such as resilience, stress management skills, and social support networks.



Réinventer le soin des addictions comportementales: la médecine centrée sur la personne

WITTERLINGE LINE WE EDWARDS

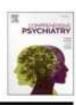


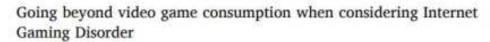


Contents lists available at ScienceDirect

Comprehensive Psychiatry

journal homepage: www.elsevier.com/locate/composych





Sezen Cekic ", Benoît Bediou ", Sophia Achab , Michael Rich ", C. Shawn Green , Daphné Bavelier ",

Another research article examines data on online video game disorder from hundreds of gamers.

The authors discuss the multiple dimensions including cognitive, emotional and social aspects.

They emphasize the importance of considering the player's overall context, rather than focusing solely on the time spent playing.



Background

Recognizing the crucial importance of understanding the impact of video games on health in today's gaming-dominated world, our study aimed to investigate the relationship between gaming time and Internet Gaming Disorder (IGD). Despite the widespread assumption that a connection exists between both, previous studies have revealed highly variable associations, highlighting significant weaknesses in establishing a robust link.

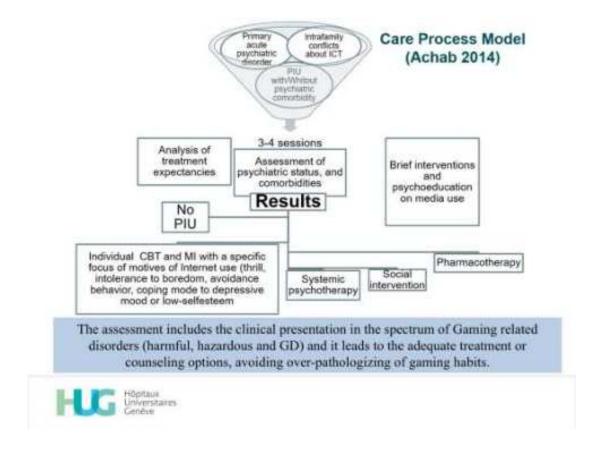
Methods

To unravel this complex relationship, we recruited two independent samples of League of Legends players. We combined the collection of self-reported and actual gameplay data, together with assessments of mental health, personality traits, and cognitive abilities.

Results

Surprisingly, none of the gaming variables demonstrated a robust and stable association with IGD, regardless of whether players spent less than or more than 30 hours per week gaming—a threshold suggested by the American Psychiatric Association as a potential indicator of disordered gaming. Notably, mental health factors, such as anxiety, depression and ADHD, emerged as the most influential predictors of IGD.

Investigate video game conduct in the person's personal and social context





Video Games

This chapter focuses on the importance of examining video game conduct in the personal and social context of the individual.

The authors discuss the psychological and social factors that can influence the development of a video game addiction.

They insist on the need for an in-depth evaluation that takes into account the player's gambling behaviour and environmental and relational aspects.

The article proposes methods to investigate these factors and develop personalized interventions.



RESEARCH ARTICLE

Open Access

Massively multiplayer online role-playing games: comparing characteristics of addict vs non-addict online recruited gamers in a French adult population

VULNERABLE INDIVIDUAL

Sophia Achab^{1,2,3}, Magali Nicolier¹, Frédéric Mauny^{4,9}, Julie Monnin^{1,9}, Benoit Trojak⁷, Pierre Vandel^{1,2}, Daniel Sechter^{1,2}, Philip Gorwood^{6,9} and Emmanuel Haffen^{1,2,6,4}

Achab, Nicolier, Mauny, Monnin, Trojak, Vandel, Sechter, Gorwood, Haffen. BMC Psychiatry 2011

Risk factors

Personality Traits

Impulsivity, Low self-esteem, Anxious tendencies

Motivations

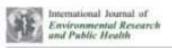
Competition, advancement, reduced anxiety, comfort, greater personal satisfaction, sense of power

Mental health issues

Depression, anxiety, or other mental disorders can use screens as an escape mechanism

Protective factors

Leisure, pleasure, experience-seeking





Article

Predictors of Gaming Disorder or Protective from It, in a French Sample: A Symptomatic Approach to Self-Regulation and Pursued Rewards, Providing Insights for Clinical Practice

Sophia Achab 1.40, Stephane Rothen 20, Julie Giustiniani 3.40, Magali Nicolier 3.40, Elizabeth Franc 1, Daniele Zullino 1, Frederic Mauny 3.8 and Emmanuel Haffen 3.4.70

Achab; Rothen; Giustiniani; Nicolier; Franc; Zullino; Mauny; Haffen. IJERPH 2022



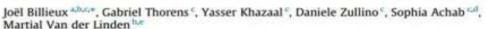
Contents lists available at ScienceDirect

Computers in Human Behavior

journal homepage: www.elsevier.com/locate/comphumbeh



Problematic involvement in online games: A cluster analytic approach





Billieux, Thorens, Khazaal, Zullino, Achab, Van der Linden Computers in human Rehavior 2015

Self-reported dependence on mobile phones in young adults: A European cross-cultural empirical survey

OLATZ LOPEZ-FERNANDEZ^{1,2a}, DARIA J. KUSS¹, LUCIA ROMO³, YANNICK MORVAN³, LAURENCE KERN^a,
PIERLUKII GRAZIANI^{5,5}, AMĒLIE ROUSSEAU⁷, HANS-JŪRGEN RUMPF³, ANJA BISCHOF⁶, ANN-KATHRIN GĀSSLER⁵,
ADRIANO SCHIMMENTI⁵, ALESSIA PASSANISI⁵, NIKO MĀNNIKKŌ¹⁰, MARIA KĀĀRIĀNEN¹³, ZSOLT DEMETROVICS¹²
ORSOLYA KIRĀLY¹², MARIANO CHĠLIZ¹³, JUAN JOSĒ ZACARĒS¹⁴, EMILJA SERRA¹⁴, MARK D. GRIFFITHS¹,
HALLEY M. PONTES¹, BERNADĒTA LĒLONĒK-KULĒTA¹⁵, JOANNA CHWASZCZ¹⁶, DANIĒLĒ ZULLINO^{17,78},
LUCIEN ROCHAT¹⁰, SOPHIA ACHAB^{17,38} and JOĒL BILLIĒLUX^{3,78}*

Lopez-Fernandez, Kuss, Romo, Morvan,..., Zullino, Rochat, <u>Achab</u>, Billieux . **J Behav Addict**

2017





Article

Perceptions Underlying Addictive Technology Use Patterns: Insights for Cognitive-Behavioural Therapy

Olatz Lopez-Fernandez ^{1,*(1)}, Lucia Romo ^{2,3}, Laurence Kern ⁴, Amélie Rousseau ^{1,6}, Pierluigi Graziani ^{7,8}, Lucien Rochat ⁶, Sophia Achab ^{10,11}(2), Daniele Zullino ^{10,11}, Nils Inge Landro ¹², Juan Jose Zacarés ¹³(2), Emilia Serra ¹³(3), Mariano Choliz ¹⁴(3), Halley M. Pontes ¹⁵(4), Mark D. Griffiths ¹⁶(5) and Daria J. Kuss ¹⁶(6)



Lopez-Fernandez, Romo, Kern, Rousseau, Graziani, Rochat, Achab, Zullino, et al. IJERPH 2022

Self-reported smartphone use addiction in Europe among young adults is influenced by

- frequency, use of specific apps (SR and JV),
- gender (female),
- continents (lesser Europe), regions (lesser Eastern Europe)





Action

Problematic Internet Use among Adults: A Cross-Cultural Study in 15 Countries

Olatz Lopez-Fernandez ^{1,2,3,4,*}, Lucia Romo ^{5,6}, Laurence Kern ^{7,8,9}, Amélie Rousseau ¹⁰, Bernadeta Lelonek-Kuleta ¹¹, Joanna Chwaszcz ¹³, Niko Männikkö ^{12,13}, Hans-Jürgen Rumpf ¹⁴, Anja Bischof Orsolya Király ¹⁵, Ann-Kathrin Gässler ¹⁶, Pierluigi Graziani ^{17,18}, Maria Kääriäinen ^{12,19}, Nils Inge Landro ²⁰, Juan José Zacarés ²¹, Mariano Chóliz ²², Magali Dufour ²³, Lucien Rochat ²⁴, Daniele Zullino ²⁴, Sophia Achab ^{24,25}, Zsolt Demetrovics ^{15,26}, Mark D. Griffiths ^{27,28} and Daria J. Kuss ^{27,28}

Lopez-Fernandez, Romo, Kern, Rousseau, ... Zullino, <u>Achab</u>, et a J Clin Med 2023



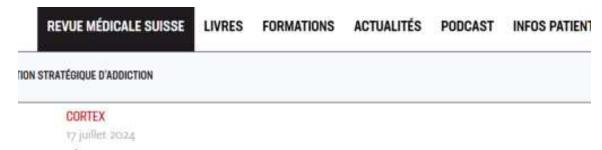
Comment on the global gaming industry's statement on ICD-11 gaming disorder: a corporate strategy to disregard harm and deflect social responsibility?

Daniel L. King K. Gaming Industry Response Consortium

First published: 14 July 2018 | https://doi.org/10.1111/add.14388 | Citations: 31

King, Gaming Industry Response Consortium: Abbott, Achab et al. Addiction 2018





Écrans et production stratégique d'addiction

Sophia Achab (6)

DOI: 10.53738/REVMED:2024.20.882.1384

Achab S.

Rev Med Suisse, 2024





Gaming disorder and the COVID-19 pandemic: Treatment demand and service delivery challenges

Journal of Behavioral Addictions

DOI:

10.1556/2006.2022.00011 © 2022 The Author(s) DANIEL L. KING^{1*} , SOPHIA ACHAB^{2,3} , SUSUMU HIGUCHI⁴ , HENRIETTA BOWDEN-JONES^{5,6,7}, KAI W. MÜLLER⁸ , JOËL BILLIEUX^{9,10} , VLADAN STARCEVIC¹¹ , JOHN B. SAUNDERS¹² , PHILIP TAM¹³ and PAUL H. DELFABBRO¹⁴

King, <u>Achab</u>, Higuchi, Bowden-Jones, Müller, Billieux, Starcevic, Saunders, Tam, Delfabbro J Behav Addict. 2022

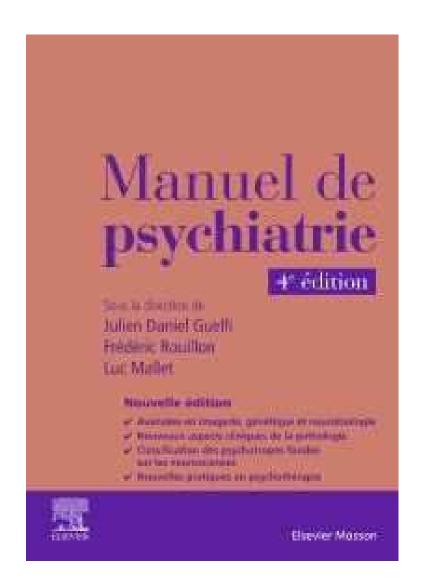




- Addiction aux jeux vidéo, quand le besoin remplace l'envie

L'émission du 12 juin 2023

https://pages.rts.ch/podcastsoriginaux/programmes/dingue/14075659-addictionaux-jeux-video-quand-le-besoin-remplace-lenvie-12-06-2023.html?anchor=14075658#14075658



EN BREF,

- Aucune molécule n'a d'indication formelle à ce jour.
- Nombre très limité d'essais contrôlés randomisés.
- Efficacité du Bupropion seul et en association avec la psychoéducation et la psychothérapie, et supériorité VS placebo et VS Escitalopram.
- Approches combinant psychothérapie et Bupropion supérieures au Bupropion seul.
- Efficacité de deux molécules dans le traitement tant des symptômes du Gaming disorder que de ceux du THADA chez des enfants et adolescents.

Achab Sophia, Khatcherian Eugenie.

Traitements biologiques des addictions sans substance.

In: Manuel de Psychiatrie. Julien-Daniel Guelfi, Frédéric Rouillon et Luc Mallet (Ed.): Elsevier Masson, 2021.

REVUE MÉDICALE SUISSE

Usages problématiques des médias sociaux: appel à une approche personnalisée

Dre SOPHIA ACHAB CA et Pr JOËL BILLIEUX CA

Rev Med Suinse 2022; 18: 1146-8 | DOI: 10.53738/REVMED.2022.18.785.1146

Social networks

This article explores the problematic use of social networks and advocates for a personalized approach in the treatment of this addiction.

The authors point out that standardized interventions are often not sufficient to address the complexity of addictive behaviors related to social networks. They offer a person-centered approach, which takes into account the individual, psychological and social factors of each user.

The article highlights the importance of personalized assessment and collaboration between the patient and the healthcare professional to develop appropriate treatment strategies.

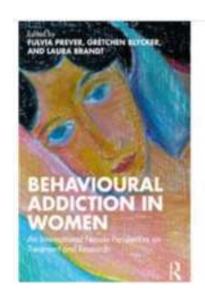




Systematic Review

Feelings of Loneliness: Understanding the Risk of Suicidal Ideation in Adolescents with Internet Addiction. A Theoretical Model to Answer to a Systematic Literature Review, without Results

Eugénie Khatcherian 1, Daniele Zullino 1,2, Diego De Leo 3,4,5 and Sophia Achab 1,2,*



Part V - EUROPE

14. Shielded from View? Gender-bias in Gambling Research, Prevention and Treatment

Heather Wardle and Fay Laidler

15. Gender-specific Personalized Care Delivery for Problematic use of Internet in Switzerland

Sophia Achab

16. Gambling Disorders among Women with Suicidality: Guidance and Specificities

Mélina Andronicos and Monique Séguin

Problematic Internet use among women

This chapter illustrates the importance of thorough clinical assessment and personalized treatment approach.

The author discusses the specificities of these disorders in women and proposes methods for a detailed psychological and social assessment adapted to gender.

The article highlights real-life examples of personalized treatments that have shown positive results, highlighting the importance of a person-centered approach to treatment.

Achab

Gender-specific Personalized Care Delivers for PUI in Switzerland. In Book Behavioural Addictions in Women, Prever, Blycker, Brandt Routledge; 2024

ADDICTION MEDICINE

EDITED BY John Saunders | David Nutt | Susumu Higuchi Sawitri Assanangkornchai | Henrietta Bowden-Jones Wim van den Brink | Yvonne Bonomo | Vladimir Poznyak Andrew Saxon | John Strang

Provides a practical guide to the management of people with addictive disorders

Contains relevant epidemiology and pharmacology, and outlines the broad approaches to minimizing harm from substance use

Covers specific types or groups of psychoactive substance

Presents useful tools for screening, assessment, diagnosis and management



Management

Psychosocial interventions

Psychosocial interventions are the mainstay of treatment of gambling disorder. There are several for which an evidence base exists. Treatment is primarily based on individual or group psychotherapy using CBT (Box 20.2), systemic approaches, and motivational interviewing.

- Firstly, define treatment objectives (abstinence or controlled gambling) with the patient.
- Assess and treat psychiatric comorbid conditions such as depressive mood or anxiety disorder, to increase efficacy.
- Assess and treat individual risk factors for gambling disorder (e.g. impaired self-regulation, sensation seeking, and maladaptive coping).
- Assess and treat contextual risk factors for gambling disorder (e.g. social isolation, difficult life-events, and increased access to gambling opportunities such as online offer).
- Prevent relapses through identifying situations and cues triggering uncontrolled impulses for gambling.
- Adapt treatment to specific groups such as women, youth, and seniors.
- A very low rate of patients seek treatment for gambling disorder (i.e. shame, financial barrier), e-health has developed therefore to address the issue (Box 20.3).
- Peer support and mutual-help groups can be helpful for the patient, such as GA.

ADDICTION MEDICINE

EDITED-BY John Saunders | David Nutt | Susumu Higuchi Sawitri Assanangkornchai | Henrietta Bowden-Jones Wim van den Brink | Yvonne Bonomo | Vladimir Poznyak Andrew Saxon | John Strang

Provides a practical guide to the management of people with addictive disorders

Contains relevant epidemiology and pharmacology, and outlines the broad approaches to minimizing harm from substance use

Covers specific types or groups of psychoactive substance

Presents useful tools for screening, assessment, diagnosis and management



Box 20.2 CBT for gambling disorder

- CBT showed significant efficacy for gambling disorder.
- The aim is to act on both problem gambling behaviour and on specific maladaptive cognitions.
- Behavioural desensitization consists in reducing progressively gambling behaviour (e.g. frequency, amount of bets).
- Cognitive remediation consists in addressing cognitive biases (i.e. hazard denial, illusion of control, near misses, gain expectancies, superstitious beliefs, chasing).

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Protective measures

- Encourage patients to self-exclude both online from gambling sites and also in person from land-based venues such as casinos.
- Encourage patients to subscribe to the banking blocks that prevent spending on gambling products. Most banks now make these available on their apps without needing to speak to a bank employee. It is an optout option instead.
- Encourage patients to be more vigilant to dates of payments and to gambling gains, as at-risk situations for gambling relapse. Pay day is a high-risk moment. Allowing loved ones to have access to one's financial accounts helps with prevention.
- Discuss with the patient if management of financial affairs should be delegated to a third party (family member or guardian) if the shared approach has led to further losses.

In debt management

- Financial losses and related negative consequences should be assessed and addressed.
- Assistance with debt repayment scheduling by a social worker could be helpful to reduce the psychological burden on the patient.
- Counselling on budget management can help the patient recover control of money allocation and to increase awareness on intangible gambling transactions' weight on over-indebtedness.

ADDICTION

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Pharmacological treatment

- Pharmacotherapy is not the first-line treatment for gambling disorders.
- Pharmacological treatment for severe psychiatric comorbid conditions such as mood disorder or anxiety disorder is indicated in gambling disorder's management.
- Opioid antagonists target reward-seeking behaviours and show promising empirical results on urges/cravings for gambling and on gambling severity symptoms. Naltrexone, at the standard dose of 50 mg daily, is the medication most commonly prescribed.
- Pharmacotherapy, when commenced, should be combined with psychotherapy for gambling disorder to increase efficacy.

OXFORD HANDBOOK OF

ADDICTION MEDICINE

EDITED BY John Saunders | David Nutt | Susumu Higuchi Sawitri Assanangkornchai | Henrietta Bowden-Jones Wim van den Brink | Yvonne Bonomo | Vladimir Poznyak Andrew Saxon | John Strang

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Box 20.3 e-Health for gambling disorder

- Aims at increasing access to treatment opportunities (e.g. affordable, anonymous, continuously available, and self-paced).
- Mainly based on CBT approach for gambling disorder.
- Can be the unique treatment modality or to support face-to-face psychotherapy.
- Mobile apps allow for ecological assessment of cravings and associated cognitive and emotional states.
- Efficacy is being empirically assessed with promising results.



Effectiveness of a web-based self-help tool to reduce problem gambling: A randomized controlled trial

Journal of Behavioral Addictions

12 (2023) 3, 744-757

DOI:

10.1556/2006.2023.00045 © 2023 The Author(s) NIKOLAOS BOUMPARIS^{1*} ©, CHRISTIAN BAUMGARTNER¹ ©, DORIS MALISCHNIG² ©, ANDREAS WENGER¹ ©, SOPHIA ACHAB^{3,4} ©, YASSER KHAZAAL^{5,6} ©, MATTHEW T. KEOUGH⁷ ©, DAVID C. HODGINS⁸ ©, ELENA BILEVICIUS⁹ ©, ALANNA SINGLE⁹ ©, SEVERIN HAUG¹ © and MICHAEL P SCHAUB¹ ©

Perceptions of and Preferences for Telemedicine Use Since the Early Stages of the COVID-19 Pandemic: Cross-Sectional Survey of Patients and Physicians

Sanae Mazouri-Karker ¹, Robin Lüchinger ², Olivia Braillard ³, Nadia Bajwa ^{2 4}, Sophia Achab ^{5 6}, Patricia Hudelson ⁷, Melissa Dominicé Dao ⁷, Noelle Junod Perron ^{2 8}

Despite the development of video, the **acceptability** of **video** remains **lower** than that of the **phone** for **most health issues** or **patient requests**.

There is a **need** to **better define** for **which patients** and in **which medical situations video** can become **safe** and **efficient**.

POPULATION STUDY ARTICLE





Has telemedicine come to fruition? Parents' and pediatricians' perceptions and preferences regarding telemedicine

Nadia M. Bajwa^{1,2 SI}, Noelle Junod Perron^{2,3}, Olivia Braillard⁴, Sophia Achab^{5,6}, Patricia Hudelson⁴, Melissa Dominice Dao⁴, Robin Lüchinger² and Sanae Mazouri-Karker⁷

The COVID-19 pandemic spurred the expansion of the use of telemedicine in pediatric care.

Few studies have addressed parent and pediatrician perceptions and preferences regarding telemedicine.

- •Both parents and pediatricians consider certain telemedicine modalities (phone, email, video, and instant message) pertinent in only specific clinical situations.
- •Advantages of telemedicine outweigh disadvantages with parents and pediatricians appreciating the increased access to care, time savings, and avoiding transport.
- •However, the lack of a physical examination remains a significant disadvantage.
- •Convenience, quality of care, trust, strong pediatrician-parent relationship, technical reliability, user-friendliness, and privacy considerations play significant role in shaping attitudes towards telemedicine.



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S. Missert Forbit et al.

Framing

Pauses

Parker Educated and Contacting ACT LISTED STATES

Empathy

Patients preferences for communication during video consultations



Sanae Mazouri-Karker ^{6, 7, 1, 2}, Olivia Braillard ^{6, 3, 4}, Robin Lüchinger ^{6, 6, 6}, Nadia Bajwa ^{6, 6, 7, 8}, Sophia Achab ^{6, 6, 9, 10}, Patricia Hudelson ^{6, 11, 12}, Mélissa Dominicé Dao ^{6, 6, 13, 14}, Noëlle Junod-Perron ^{6, 6, 13, 16}

Our results confirm that patients **prefer the use of video specific communication behaviours recommended by experts** except for **shifting eye gaze** and **long pauses** after physician's statements.

PRACTICE IMPLICATIONS
Given the increasing use of video consultations, video communication "best practices" should be systematically addressed in physician training.

Mazouri-Karker, Braillard, Lüchinger, Bajwa, Achab, Hudelson, Dao, Junod-Perron.
Patients preferences for communication during video consultations. PEC 2023









Spirituality and behavioural addictions: narrative review

Mitika Kanabar, Preethy Kathiresan, 9 Hussien Elkholy, 9 @ Arash Khojasteh Zonoozi,4 Laura Orsolini,5 @ Jiang Long,6 @ Mehdi Farokhnia, 7 @ Roshan Bhad, 8 @ Jenna L. Butner, 9 @ Francina Fonseca, 10 Vicky Phan, 11 Sophia Achab 2 and Marc N. Potenza 13

Table 2 Studies on spirituality and behavioural addiction

Type of behavioural addiction	Studies reviewed	Predominant association with spirituality
Gaming disorder	Chinese study, 401 students ³ European study, 5922 participants ⁴	Negative association
Gambling disorder	Swiss study, 5179 youths ⁵ English study, 7403 participants ⁶ Scoping review, 25 studies ⁷	Mixed association
Problematic internet use	Systematic review, 13 studies ⁸ Swiss study, 5179 youths ⁵	Mixed association
Problematic smartphone use	Korean study, 285 adolescents ⁹	Negative association
Compulsive sexual behaviour disorder	Systematic review, 59 studies ¹¹	Positive association
Compulsive buying/shopping disorder	Polish study, 430 adults ¹¹	Negative association

scientific reports



OPEN Pictograms to aid laypeople in identifying the addictiveness of gambling products (PictoGRRed study)

Additive structuras characteristics of gainning products and related messages	Pictogram	gambling game
High event frequency (virtually unlimited opportunity to play)		" where it is possible to bet several times in a row so that the gambler can continue to play practically without a break."
Fast game (high event frequency and limited scope for decision making)		"where it is possible to wager frequently but with a limited time to think before each wager."
In-game actions overly suggesting control of the outcome (in-game actions suggesting control of chance, whereas they do not or only poorly influence the outcome)		" with actions that give the player the feeling that he or she can control the outcome (win/loss) when this is not the case."
In-running betting (e.g., live betting)		"where the gambler plays at the same time as the action is in progress (e.g., live betting, sports betting during a match)."

Luquiens, Guillou, Giustiniani, Barrault, Caillon, Delmas, <u>Achab et</u> al.

Pictograms to aid laypeople in identifying the addictiveness of gambling products (PictoGRRed study). Sci Rep 12, 22510 (2022)







Applicable Regulatory Frameworks

Regulatory frameworks existing for substances, gambling, and harmful consumer products may be applicable to the PUI, but the unique aspects of the PUI require specific approaches.

Concerns include:

- the easy access of minors to the internet,
- the use of additive designs and manipulative algorithms by tech companies, and
- the growing power of artificial intelligence (AI).

> Rev Med Suisse. 2021 Jun 9;17(742):1118-1121.

[Internet patterns of use and which health promotion in Switzerland?]

[Article in French]
Sophia Achab 1 2

Affiliations + expand
PMID: 34106537

Abstract in English, French

Internet has become a tool of our daily lives; it can nevertheless be at health risks for excessive users. This is a global and national public health challenge, and health policy responses have been shaping up for a decade. Doctors are key players in health systems for the early detection of these disorders and for the health promotion in this area. In order to be able to play their role, they must benefit from increasing their awareness of the health risks of these uses, the vulnerable people profiles, the possible clinical pictures of these disorders and the strategic and regulatory framework at the national level. This article synthesizes these aspects in Switzerland to facilitate access to this corpus of knowledge for medical practitioners.



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NOTRE BOOKLET ECRANS ET JEUNES

10 Consells aux parents pour promouvoir une utilisation consciente des écrans, tout en favorisant des relations familiales saines et des activités variées

(cliquer sur l'image pour accéder au pdf du booklet)



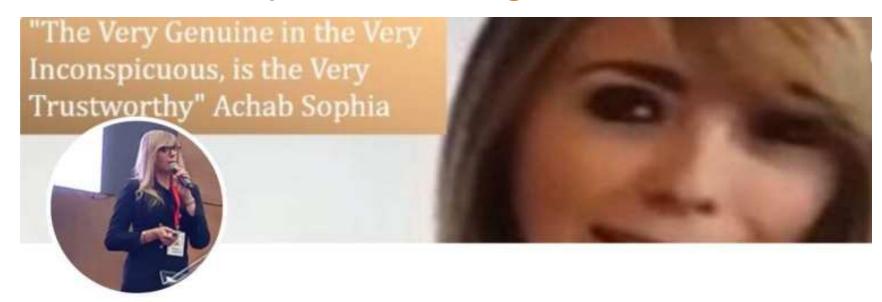


Conclusion

Balance between the benefits of Digital tools and well-being

https://www.linkedin.com/in/sophia-achabdigitalwellbeing/
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https://www.unige.ch/medecine/psyat/fr/centre-collaborateur-de-loms-pour-laformation-et-la-recherche-en-sante-mentale/

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