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Gambling Disorder: The Cousin to Substance Abuse Disorder

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Dr. LaDonna McCune is an International Certified Gambling Counselor-Level II and a Licensed Alcohol Drug Counselor. She is the Undergraduate Director of the Substance Abuse Studies Program at the University of Central Oklahoma and teaches in the Graduate Addictions Counseling Program for the University. There are both similarities and differences in substance abusers and compulsive gamblers. The Diagnostic Statistical Manual of Psychological Disorders (DSM V) defines disordered gambling as persistent and recurring problematic gambling behavior leading to clinically significant impairment or distress. In the previous version of the DSM pathological gambling was listed under impulse disorders and in the newest version of the DSM gambling disorder has been moved to substance related and addictive disorders. This move seems to be a logical move considering the similarities in the addictions.

Both substance abusers and compulsive gamblers experience loss of control. Gambling is different because it is a behavior addiction. However, the gambler becomes pre-occupied with their gambling the same as the substance abuser is preoccupied with their drug of choice. They both are unsuccessful trying to cut back, control or stop their addiction. Both substance abusers and gamblers experience withdrawal. With gamblers it is restlessness and irritability and with substance abusers it is a physical and mental withdrawal. Gamblers need to gamble more and more to feel the same effect and substance abusers need to use more and more of their drug of choice to feel the same effect. In both cases they are building up a tolerance. Gamblers and substance abusers use their addiction as a way of escaping their problems or relieving

a dysphoric mood. They often use their drug of choice or gamble when feeling distressed, helpless, guilty, anxious, or depressed. Substance abuse and gambling can cause significant damage to the portions of the brain that control reward and pleasure. In time, the brain cells involved in the pleasure pathway might be unable to function properly unless the person is gambling and/or using alcohol or other drugs [1].

Gamblers and substance abusers have both jeopardized or lost significant relationships, jobs, educational or career opportunities because of the use or because of their gambling. Denial is a factor in the addiction of substances and gambling. Both the addict and their families can be in denial. Families of both substance abusers and gamblers are greatly affected. There are self-help groups available for the addict and families of both as well. When the addicted come in for treatment, it is vitally important to include the families in the treatment process. Families frequently state that they feel betrayed by the gambler as well as families of substance abusers. Many gamblers have hidden the extent of their gambling disorder from their family and the family is devastated to find out the financial cost. The families of gamblers experience intense anger when they discover the deceit that gambler has kept from them. Gambling is a spiritual disorder as much as substance abuse is a spiritual disorder. Spirituality is essential for true recovery.

It is important to note some of the differences between substance abuse disorders and gambling disorders. Gambling is not attributable to intoxication. Therefore, it is not as easy to identify. It can be a hidden addiction. There is no biological test for gambling. People can go on for years with their gambling addiction and their

family may know they have money problems or other issues but not recognize that the real addiction is gambling. The financial problems will multiply. People lose their homes, their savings, and their retirements. There is an intense sense of shame and guilt with gambling disorder. That leads to greater denial and stronger defenses to cover their gambling. According to the National Council on Compulsive Gambling (2020) [2], gamblers have twice the suicide rate of other addictions. There is less public awareness and acceptance of gambling as a problem. Gambling disorder is seen by many as a weakness not a mental health problem.

Gambling is not self-limiting. You can give someone \$10,000 worth of drugs and they will overdose but \$10,000 to spend at the casino is easy to spend very quickly. Gamblers have dreams of financial success and their fantasies are motivated by a big win in the beginning. Most compulsive gamblers have won a jackpot early on in their gambling career and they expect that big win again. Gamblers Anonymous (G.A.) is the recommended support group for compulsive gamblers and cannot be substituted with Alcoholics Anonymous or Narcotics Anonymous. It is important for gamblers to learn money management skills in their recovery programs and that is taught in G.A. There are personality traits present in gamblers that are not always present in substance abusers. Therapists should consider if there are issues related to grandiosity, egotism and entitlement that need to be addressed with the gambler. Any use of substances is mind altering while not all forms of gambling put the gambler in action. Playing bingo is not a trigger for an action type

gambler who is interested in games of skills such as poker, other card games, dice games, horse racing, or craps. Action gamblers are more likely to be males with a high IQ who are competitive and narcissistic. They started gambling at a younger age and like the feeling of power from winning. They most likely had a winning phase that motivated them to continue. They are looking for that next big jackpot. Gambling treatment begins with harm reduction instead of abstinence and that is one of the major differences in treatment of the disorders. Harm reduction is not an alternative to relapse; it recognizes abstinence as an ideal outcome but accepts alternatives that reduce harm or risk. Considering these differences, clinicians cannot assume that their knowledge or experiences in substance abuse treatment qualifies them to treat people with a compulsive gambling problem.

Acknowledgement

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Conflict of Interest

Author has no conflict of Interest.

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2. (2020) National Council on Compulsive Gambling.