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**Health Systems Division, Problem Gambling Services**

# DSM-5 Gambling Treatment Policy Statement

*September 23, 2015*

The Oregon Health Authority (OHA), Health System Division (HSD) encourages problem gambling providers to implement DSM-5.Because HSD does not provide direct clinical services we do not have a required implementation date. On October 1, 2015, the United States transitions from ICD-9 (International Classification of Disease) to ICD-10 as the medical code set for medical diagnoses and inpatient hospital procedures. With the transition to ICD-10, many of our providers are updating their electronic health record systems to reflect this change, and if they have not already, will be implementing the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). Oregon’s Problem Gambling Services (PGS) program has received numerous questions regarding the diagnosis of Gambling Disorder within the DSM-5 and the criteria endorsed. This policy clarifies how Oregon’s Problem Gambling Services system will move towards implementation of the DSM-5 in relation to data collection.

**Summary of Changes: DSM-IV to DSM-5 for Gambling Diagnosis.**

* DSM-5 replaced the DSM-IV diagnosis of Pathological Gambling with Gambling Disorder and reclassified gambling disorder from an Impulse Control Disorder to a Non-Substance-Related and Addictive Disorder. According to the American Psychiatric Association (APA), this change “reflects the increasing and consistent evidence that some behaviors, such as gambling, activate the brain reward system with effects similar to those of drugs of abuse and that gambling disorder symptoms resemble substance use disorders to a certain extent.”
* Gambling Disorder is a persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress, as indicated by the individual exhibiting four (or more) of the nine criteria in a 12-month period.
* DSM-5 requires four, rather than five criteria in a 12 month period for the gambling disorder diagnosis and excludes the “has committed illegal acts such as forgery, fraud, theft or embezzlement to finance gambling” criterion.

**How will PGS implement the DSM5?**

In the past, PGS has accepted individuals into our programs who have met five or fewer of the pathological gambling criteria with DSM-IV. We will continue this process and accept any individual who meets one or more of the nine criteria within the DSM-5 for Gambling Disorder in the last 12 months. It will continue to be important to serve all those afflicted with gambling disorders, no matter the severity, in order to resolve current problem and reduce future risk.

At this time, we will continue to use the current Gambling Participant Monitoring System (GPMS) forms with the DSM-IV criteria and clinicians will be allowed to indicate the criterion of “Committed Illegal Acts for Money”. Starting January 1, 2016 we will update the GPMS forms to reflect the DSM-5 criteria (box 7 of the Client Enrollment Record Abstracting form). However, we will determine how to continue to collect information on individuals who have committed illegal acts, as this is an important data collection point for system evaluation purposes.

Additional questions, contact: Greta Coe, Problem Gambling Services Manager, at [greta.l.coe@state.or.us](mailto:greta.l.coe@state.or.us) or (503) 945-6187.