

Gaming Disorder Treatment Guidance

The worldwide prevalence of Gaming Disorder is estimated to be approximately 2-3% (Stevens et. al 2020). Oregon Health Authority Problem Gambling Services has been approved to provide services and support for Oregonians dealing with Gaming Disorder. Services can be provided through Problem Gambling Treatment and Prevention Funding, **at no cost to Oregon residents**, even if an individual does not meet criteria for Problem Gambling or Gambling Disorder. OHA PGS has developed the following guidance for contracted treatment providers interested in providing treatment services for Oregonians dealing with Gaming Disorder and Problematic Gaming behavior.

- Providing treatment for Gaming Disorder is optional and left to the discretion of the contracted program. However, OHA does request consistent availability of services should a program “opt in” to provide services.
- OHA PGS will not independently promote treatment for Gaming Disorder. However, programs that have opted in to provide treatment are free to self-promote.
- OHA PGS will permit programs that have opted in to share information about capacity with the Oregon Problem Gambling Helpline. The Oregon Problem Gambling Helpline can provide Gaming Disorder specific treatment referrals to callers.
- OHA PGS recommends utilizing the APA diagnostic criteria listed below to aid in clinical decision-making including diagnosis and service planning.
- Gaming Disorder is acknowledged by the American Psychiatric Association as a challenge in need of further research. The proposed criteria for the APA diagnostic criteria of Gaming Disorder is as follows (APA):
 - Persistent and recurrent use of the internet to engage in games, often with other players, leading to clinically significant impairment or distress as indicated by five (or more) of the following in a 12-month period:
 - 1) Preoccupation with internet games. The individual thinks about previous gaming activity or anticipates playing the next game; internet gaming

becomes the dominant activity in daily life. (This disorder is distinct from internet gambling, which is included under gambling disorder.)

- 2) Withdrawal symptoms when internet gaming is taken away. These symptoms are typically described as irritability, anxiety or sadness, but there are no physical signs of pharmacological withdrawal.
 - 3) Tolerance—the need to spend increasing amounts of time engaged in internet games.
 - 4) Unsuccessful attempts to control the participation in internet games.
 - 5) Loss of interest in previous hobbies and entertainment as a result of, and with the exception of, internet games.
 - 6) Continued excessive use of internet games, despite knowledge of psychosocial problems.
 - 7) Has deceived family members, therapists or others regarding the amount of internet gaming.
 - 8) Use of internet games to escape or relieve a negative mood e.g. feelings of helplessness, guilt, anxiety.
 - 9) Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of participation in internet games.
- For diagnosis coding in American Electronic Health Records, it may be necessary to utilize a current APA diagnostic code. In these instances, OHA PGS recommends and approves utilization of the APA-DSM5 diagnostic code 312.89 (F91.8) – Other Specified Disruptive, Impulse-Control, and Conduct Disorder.
 - In PG NET, providers will need to code the diagnosis as a *diagnostic impression* of Gaming Disorder.
 - Oregon Health Authority Problem Gambling Services recommends further specialized training for providers. Oregon Health Authority will offer specialized training opportunities to those within our system and for interested providers. A&D 81 funds can be used to support gaming disorder knowledge and training.