

EMDR by gambling addiction

A replicated single case study, wich investigates the value of EMDR in the treatment of gambling addiction.

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To gain more insight into the effects of EMDR in the treatment of a pathological gambler. It is important to conduct research on the influence of EMDR on pathological gambling and on which factors are influenced by EMDR . This study addresses the...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Interventional

Summary

ID

NL-OMON43146

Source

ToetsingOnline

Brief title

EMDR by Gambling Addiction

Condition

- Other condition

Synonym

gambling addiction

Health condition

pathologisch gokken

Research involving

Human

Sponsors and support

Primary sponsor: Verslavingszorg Noord-Nederland (Eelde)

Source(s) of monetary or material Support: het onderzoek wordt gefinancierd door de instelling (Verslavingszorg Noord Nederland). Er wordt subsidie gevraagd bij de vakvereniging voor EMDR (Vereniging EMDR Nederland) Zonder subsidie financieert VNN het onderzoek.

Intervention

Keyword: EMDR, Gambling addiction, Gambling Urge, Self-efficacy

Outcome measures

Primary outcome

Gambling urge

By using the Visual analogue scale (Vas) we measure the gambling urge , the client keeps daily track of his urge to gamble. The VAS craving is a scale that measures a single factor.. The Vas scale is compact and easy and is a common tool in investigating craving (Mezinskis , J.P. and Honos - Webb, L. 2001). On a scale of 0-100 (0 no urge, 100 incredibly strong urge). We measure the question: How much desire are you having today to gamble?

Feeling of self-control :

For the measurement of the feeling of self-control , we use a Vas scale . On a scale of 0-100 (0 no sense of self control, 100 incredibly strong sense of self control). We measure the question : How much control do you experience today about the gambling?

Secondary outcome

Urge to gamble

There is also a pre- and post measurement . This is the OCDS -substances . The OCDS -substances is a short questionnaire with 5 questions based on the Obsessive Compulsive Drinking Scale (De Wildt , et . Al. 2005) .

Feeling of self control

There is also a pre- and post measurement . To measure the feeling of self control we use the GASS , Gambling Abstinence Self-efficacy Scale. This questionnaire measures the self-control in gambling addiction. (Hodgins et . Al 2004).

The questionnaire includes 21 reasons why gamblers could gamble . On a 6 point scale the client rates how much confidence he / she has not to go gambling in a specific situation.

In addition, the client fills outi whether he has gambled and whether they spent more money than they had planned.

Study description

Background summary

Cognitive behavioral therapy has been used the most for the treatment of pathological gambling addiction (IVO, 2014). Behavioral addictions form only a small part of all the addictions for which the total client population seek help. Therefore there are also only a few studies on the effectiveness of treatments for behavioral addictions such as pathological gambling (IVO, 2014). Although the literature indicates that a gambling addiction can be treated just like any other (substance) addiction (Schippers et al 2014), clinical practice shows that not al treatments are as effective as treatments for substance addictions. EMDR could be a treatment that works in addiction (Leeds 2009). There is hardly any research into the effectiveness of EMDR in addictions and specifically for EMDR applied to gambling addiction. Eye movement desensitization and reprocessing (EMDR) is a therapy that has been

designed primarily for people who suffer from the effects of a traumatic experience, such as an accident, sexual violence or a violent incident. It is a therapeutic approach which involves the intrinsic information processing in the storage of memories. Current stress symptoms are being controlled by unpleasant events of the past (memory representations) that are not properly being processed and are stored in a dysfunctional manner (Solomon & Shapiro 2008). Research has shown that EMDR has an effect on the reduction of symptoms of post-traumatic stress (i.a. Bisson et al., 2007).

The developments in the field of EMDR (Shapiro, 1989) and the use of EMDR with other disorders than PTSD (Leeds, 2009), provide evidence that EMDR could also work for treating addictions. There are case studies and reports (Barbiery 2008; Hase, 2009; Miller, 2010; Omaha, 1998), which indicate that EMDR can make an effective contribution to the treatment of addiction.

There are only a few case studies about EMDR and gambling addiction. These studies provide evidence that EMDR may influence the symptoms of gambling addiction (Bae et al 2013. Miller 2010). Bae Han and Kim (2013) found evidence that the impulsive behavior improved early in treatment with EMDR, because they put the focus on trigger situations. Bae et al. found that the ego strength was increased by the client, because they made use of empowering techniques, allowing gamblers to get more control over the gambling. Evidence from this study shows that EMDR affects the self-control and the urge to gamble. It is important that more research is conducted about the role of EMDR in a pathological gambling addiction treatment.

Study objective

To gain more insight into the effects of EMDR in the treatment of a pathological gambler. It is important to conduct research on the influence of EMDR on pathological gambling and on which factors are influenced by EMDR . This study addresses the urge to gamble and the sense of self efficacy.

Study design

In this study, we make use of a replicated single case design, with a multiple baseline A-B design. A distinction has been made between the baseline period (no intervention) and the intervention period in the treatment of gambling addiction. The primary outcome is the time series analysis of the sense of self-efficacy and urge to gamble with a visual analogue scale. This is a daily measurement .Is the variable progressively affected or are there peaks or valleys seen after a session of the intervention. Another reason to choose a single case design is that there are only a few admissions of gambling addicts in VNN . In addition, there is a pre- and post- measurement with standardised measurements. However, these measurements are not the primary measurements.

Intervention

There EMDR is given according to the protocol of Hornsveld and Markus (2015) it is offered to clients who are in the waiting period for the 'treatment as usual'. Overall the 'treatment as usual' is a group treatment containing both psychoeducation and cognitive behavioral therapy elements.

The EMDR protocol for addiction:

Hornsveld and Marcus (2015) have developed a protocol for treating addiction by using EMDR. The protocol has components about loss of control, reality testing and about trigger situations. They describe this protocol as a toolbox with modules that can be used for the treatment of addiction. The toolbox is based on the standard protocol EMDR and the development of protocols for EMDR in the field of addiction.

There are six sessions of 90 minutes EMDR, which focuses on: to desensitize memories of loss of control, desensitize positive memories, desensitize couple reminders, desensitize trigger situations and desensitize a positive flashforward. This will be done according to the protocol of Hornsveld and Markus (2015). The treatments are given by, preferably, EMDR therapists who have done the follow up EMDR training and preferably followed the masterclass addiction and EMDR.

Study burden and risks

For the client, it is a new form of therapy, which provides a similar burden and risk for the client as the "treatment as usual (CBT in group or individual CBT)". The client can benefit from a new treatment, but maintaining the treatment as usual. The burden for the client is to fill out a daily list, which takes about 5 minutes and do so for at least 9 weeks (maximum is 11 weeks). At the start the client will fill out 3 questionnaires which takes 30 minutes and at the end of the treatment it takes another 15-30 minutes to fill out 2 questionnaires and write down their experiences about the treatment.

Contacts

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Scientific

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Ambulatory adult clients , diagnosed with pathological gambling. Pathological gambling is the primary diagnosis.

Exclusion criteria

Clients with whom the intake shows that alcohol and drug-related disorders are on foreground and they use substances regularly. Clients with severe PTSD and other psychiatric Axis I problems are excluded from the study.

Study design

Design

Study type: Interventional

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

Recruitment

NL
Recruitment status: Recruitment stopped
Start date (anticipated): 01-12-2016
Enrollment: 15
Type: Actual

Ethics review

Approved WMO
Date: 17-10-2016
Application type: First submission
Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL57168.042.16