

## Chapter 1 : Television and Non-Chemical Addictions

*A lot of addicts have both chemical and behavioral addictions, known as comorbidity. Addicts often replace one addiction with another as well -- switching from a drug to a behavior. For example, a person may develop an eating disorder as an unhealthy way to fill the void from giving up drinking.*

It can be used to predict which people may be more likely to engage in gambling behaviors. The results of the GAS may be used to develop prevention and education programs. The four subscales of this instrument measure casino gambling, horse race gambling, lottery gambling, and general gambling. Global Appraisal of Individual Needs GAIN A self-reporting instrument created by Michael Dennis, the GAIN implements a biopsychosocial model of assessment of substance use, physical health risk, mental and emotional health, and interpersonal relationships. The test takes approximately 50 minutes to complete, and scoring is obtained by adding the corresponding responses together. A valid test, no training is required. Dennis and Rourke report consistency reliability coefficients of .86 to .92. Internet Addiction Test This item, self-reporting questionnaire, designed by Kimberly Young, assesses whether an individual has an Internet addiction. Taking about 10 minutes to complete, it is easily scored and no training is required. Online Cognition Scale OCS A item, multidimensional instrument used to assess problematic Internet use, the OCS measures thoughts related to the Internet and scores the answers on a scale from 1 to 7 strongly agree to strongly disagree. The OCS explores four areas of problematic Internet use: The test takes approximately 10 minutes to complete and no training is required. Bat-tersey, Thomas, Tolchard, and Esterman report consistency reliability coefficients of .86 to .92. A score with 20 positive responses suggests cause for concern and recommends a consultation with a physician. Taking roughly 10 minutes to complete, it requires no training. Garner, Olmsted, Bohr, and Garfinkel report high internal consistency of .92. Work Addiction Risk Test WART A item screening measure by Bryan Robinson to differentiate individuals who work to succeed from those who work to excess, this self-administered tool is scored on a rating system of one never true , two sometimes true , three often true , or four always true. High summated scores suggest workaholic behavior. Alcohol No More Do you love a drink from time to time? A lot of us do, often when socializing with acquaintances and loved ones. Drinking may be beneficial or harmful, depending upon your age and health status, and, naturally, how much you drink.

**Chapter 2 : Behavioral addiction - Wikipedia**

*Addiction - Chemical Addictions* Chemical addiction is the general description for an addiction to a substance that must be injected or ingested. Alcohol, opiates, and cocaine are the most common of these chemicals.

This is because there is insufficient evidence at this time to group other behavioral disorders into the same category as substance abuse disorders. Future editions of the DSM might look different in regards to including these disorders. In order to meet criteria, the individual must exhibit four or more of the following symptoms over the course of 12 months: Need to use increasing amounts of money in order to achieve desired level of excitement. Is restless or excessively irritable when attempting to control or abstain from gambling. Repeated unsuccessful attempts made to control, reduce, or abstain from gambling. Regularly preoccupied with gambling. Seeks out gambling in order to cope with feelings of distress. Exhibits erratic behavior, such as lying in order to minimize or conceal gambling involvement. Impairments noted in terms of interpersonal relationships, functioning at work, or performance in school. Is reliant on others financially as the result of gambling.

General Classification of Addiction For reference, these are some of the general criteria for classifying a Substance Use Disorder [2]: The individual takes the substance in larger amounts or over a longer period of time than was originally intended. The individual expresses a persistent desire to cut down or regulate use with unsuccessful attempts. The individual spends excessive time obtaining the substance, using the substance, or recovering from its effects. The individual continues to use despite persistent or recurrent social or interpersonal problems. Impaired social, occupational, or recreational ability. Risky use of the substance. Tolerance and withdrawal symptoms. One of the conditions reviewed by the committee for inclusion in the DSM-V, Internet Addiction Disorder, involved internet-related addictive behaviors. During the review, concerns were raised regarding the lack of empirical evidence for the condition, impeding the ability to define specific diagnostic criteria for the disorder. Currently, addiction is defined as a primary and chronic disease of the brain circuitry that is responsible for modulating motivation, reward, and memory. For instance, evidence has suggested that the areas of the brain governing the control of impulses and judgment function differently in individuals suffering from addiction, as compared to their healthy counterparts. More research is needed to determine the overlapping and distinct characteristics, including more clearly delineate genetic contributions between behavioral addictions and substance-related addictions. Addictive substances have differential effects on both the brain and body, which results in diverse long-term health outcomes across each addiction disorder.

Simplifying Addiction A simple way to define addiction, whether substance-related or behavioral, is: Naim-Fell J, Zangen A. Handb Clin Neurol ; Diagnostic and statistical manual of mental disorders 5th ed. Widyanto L, McMurrin M. The psychometric properties of the internet addiction test. The ICD classification of mental and behavioral disorders: Clinical descriptions and diagnostic guidelines. Commonalities and distinctions among mechanisms of addiction to alcohol and other drugs. Alcohol Clin Exp Res ;39 The neural basis of addiction: A pathology of motivation and choice. Am J Psychiatry ; Imaging genetics and the neurobiological basis of individual differences in vulnerability to addiction. Drug Alcohol Depend ; Suppl 1: Clinical neuroscience of addiction: Similarities and differences between alcohol and other drugs. The dopamine theory of addiction: Nat Rev Neurosci ;16 5: Review of risk and protective factors of substance use and problem use in emerging adulthood. Addict Behav ;37 7: Behavioral addiction versus substance addiction: Correspondence of psychiatric and psychological views. Int J Prev Med ;3 4: Should addictive disorders include non-substance-related conditions? Introduction to behavioral addictions. Am J Alcohol Abuse ;36 5: American Society of Addiction Medicine. The voice of addiction medicine. Expanding a key addiction construct. Nicotine Tob Res ;17 A dual-systems perspective on addiction: Contributions from neuroimaging and cognitive training. Ann N Y Acad Sci ;13 Ramoz N, Gorwood P. A genetic view of addiction. Med Sci ;31 4: A Workbook for Overcoming Addictions 2nd Edition. Is there a common molecular pathway for addiction?. Nature neuroscience, 8 11 , Progress in brain research, , Neurocognitive functions in pathological gambling: Addiction, 4 ,

**Chapter 3 : Non-Chemical Addictions** – National Addiction News

*Abstract 'Addiction' denotes repetitive routines that aim to obtain chemicals and, less often, routines without that aim. The latter are behavioural addictions.*

Addiction Addictions can be physical of the body , psychological of the mind , or both. It is estimated that up to 25 percent of the American population displays some form of addictive behavior. Alcohol is a central nervous system depressant that reduces inhibitions and anxiety. A damaged liver loses its ability to detoxify the blood, which can result in permanent mental changes, organ failure, and death. Opiates also called narcotics are addictive drugs derived from opium, a drug made from poppy juice. They have a narcotic effect upon the body, meaning they dull the senses. In moderate doses, they relieve pain, promote a sense of well-being, and induce sleep; excessive doses, however, can cause coma or convulsions. Opiates include opium and its derivatives—morphine and heroin. Opium, a drug derived from the poppy, has been known since ancient times for its pain-relieving qualities and its ability to induce sleep. From the 18th through the 19th, it was widely used in Western medicine to treat a variety of ailments and was highly effective in deadening the sensation of pain during surgery. In China, addictive opium smoking was rampant by the late 18th, where opium dens flourished. Some artists and writers of the nineteenth century claimed that opium use intensified their creativity by reducing their inhibitions. Opium is grown around the world, and in some countries smoking the drug continues to be common, though it is outlawed except for medicinal purposes in most Western nations. Preparations of opium, such as paregoric, are sometimes prescribed for diarrhea. Codeine, an opium derivative, is an ingredient in many pain-relieving medications and cough syrups. Words to Know Detoxify: To remove poisonous substances from the body, generally performed by the liver and kidneys. A group of naturally occurring substances in the brain that act as analgesics, or pain relievers, and are released in response to emotional or physical stress; sometimes referred to as "internal morphine. A drug, such as an opiate, that dulls the senses, relieves pain, and causes sleep. Any derivative of opium, for example, morphine or heroin. The act of giving up the use of a drug by an addict, usually accompanied by unpleasant symptoms. Morphine is the active ingredient in opium. Once the hypodermic syringe needle was invented in 1853, the use of morphine injections for the relief of pain was adopted enthusiastically by the medical community. Some doctors even taught their patients how to inject themselves. Tragically, thousands of people worldwide became addicted to the drug. In 1874, the Bayer corporation the maker of aspirin synthesized produced by chemical means heroin from morphine and marketed it as a remedy for morphine addiction. Heroin, however, proved to be even more addictive than morphine. Physical or mental pain is relieved, and the user enters a deeply relaxed state for a few hours. The powder also can be inhaled for a milder effect. Heroin is extremely habit-forming: Cocaine is a white, crystalline powder produced from the leaves of the coca plant, a South American shrub. It is extremely and powerfully addictive—some people need only a single exposure for addiction to occur. For centuries, South American Indians have chewed the coca leaves for their stimulating and exhilarating effect. Cocaine came into use as a local anesthetic in the late 19th because of its numbing properties. As a pain reliever and stimulant, it was a common ingredient in popular nonprescription medicines of the late 19th and early 20th. By the end of the twentieth century, cocaine was used only occasionally in the medical field, sometimes as a local anesthetic for some kinds of surgery. Most cocaine now is purchased and used illegally. The white powder is often inhaled "snorted" , sometimes injected, and as free base is smoked. A solid crystalline form known as crack, the most potent form of cocaine, is also smoked. Unlike the opiates, which cause drowsiness, cocaine gives its users energy. Caffeine is a stimulant found in coffee, tea, chocolate, and cola drinks. It has been part of the human diet for many centuries and is one of the most widely used central nervous system stimulants in the world. In recent years, researchers have raised questions about possible risks associated with high caffeine intake, but no definite conclusions have been reached about the harmfulness of moderate amounts. However, some experts consider drinking large amounts of coffee or cola beverages evidence of a true addiction to caffeine. Nicotine, the active ingredient in tobacco, is highly addictive, and cigarette smoking is among the most difficult habits for people to break. Many societies throughout the world have prized nicotine for its

mood-altering properties: Addiction to nicotine results in more than 400,000 premature deaths each year from smoking-related illnesses such as emphysema and lung cancer. Withdrawal symptoms are caused by psychological, physiological, and chemical reactions in the body that are brought on as the amount of the addictive chemical in the blood begins to fall. Abrupt withdrawal from alcohol can result in uncontrollable bodily shaking, Crack users. Crack, a form of cocaine, is one of the most addictive drugs. Reproduced by permission of The Stock Market. Withdrawal from cigarettes can cause irritability and intense craving for nicotine. A coffee drinker may experience headaches and mood changes without the beverage. The hard drugs such as heroin and cocaine produce intense, sometimes violent, withdrawal symptoms. Abdominal pain, nausea, chills, tremors, sweating, hallucinations, and panic increase until eased by more of the same drug or treatment with medication to relieve the symptoms. Compulsive gambling begins with placing small bets on horses or playing low-stakes card games or craps. As the gambler experiences the exhilaration of winning, he or she engages in bigger, more frequent, and more irrational betting. Gamblers place ever-larger bets to make up for their losses and have been known to lose their jobs, their homes, and their families as a result of their addiction. Among addictions, no other is so willingly embraced than that of a workaholic, or a person addicted to work. On the surface, it might be difficult to tell if a person is a workaholic or just a hard and loyal worker. Focusing on work, workaholics tend to neglect their families, leaving the responsibility of raising their children solely to their spouses. All other social obligations are often neglected, as well. Finally, workaholics tend to neglect themselves, experiencing deteriorating health as they push themselves to the limit at work without regard for sleep or food. Counseling to identify the reason a person throws himself or herself into work is key for overcoming this addiction. The Internet connects people all over the globe, exposing them to new cultures and offering vast amounts of information. But when the computer world begins to rival the real world, it becomes an addiction. Internet addiction insulates people from intimate settings and relationships. Some people would rather commune with a computer than with their spouses and children. Many marriages, families, and even promising careers at work have been lost because an individual has become addicted to the Internet. Since this is such a relatively new disorder, few self-help groups exist. Strangely enough, there are some on-line support groups designed to wean people from the Internet. Other compulsions or addictions include exercise, especially running. Running long distances triggers the release of morphinelike substances in the brain called endorphins, producing a feeling of euphoria or happiness. This is the "high" that runners often describe. The high feels so good that the compulsive runner may engage in his hobby despite bad weather, injury, or social and family obligations. Excessive weight loss can also occur as a result of compulsive exercise. The single characteristic common among all addicts—whether their addiction is chemical or nonchemical—is low self-esteem. Some experts believe that certain people are born with the predisposition tendency to become addicted to drugs or alcohol, particularly if one or both of the biological parents was a substance abuser. Social and psychological factors also may lead an individual to addiction. A desire to fit in, an attempt to relieve anxiety, an inability to cope with the stresses of daily life—all of these factors have been cited as possible springboards to addiction. Treatment of addiction Treatment of chemical addiction includes medical care of symptoms related to substance abuse and enrollment in a drug or alcohol rehabilitation program. In addition, participation in a self-help group such as Narcotics Anonymous or Alcoholics Anonymous can provide the emotional support an addict needs to stay away from drugs or alcohol. Psychological counseling and self-help groups can also be effective in treating nonchemical addictions. It is often difficult to break the psychological and physical grip of addiction. Success depends upon the willingness of the addict to admit that a problem exists—and possession of the strength and determination to overcome it. Many former addicts have enough resolve to avoid drugs and alcohol for the rest of their lives, but studies show an equal number will take up the habit again. Also read article about Addiction from Wikipedia User Contributions: Steven Aug 16, Please send my more info on this topic!! Comment about this article, ask questions, or add new information about this topic:

*Chemical addiction: Introduction. An addiction to a variety of substances such as painkillers and heroin. The addiction is usually a result of the abuse or excessive, unnecessary use of the substance.*

Drugs substance substances commonly Addiction is a compulsion to engage in unhealthy or detrimental behavior. Human beings can become addicted to many forms of behaviors such as gambling, overeating, sex, or reckless behavior, but the term "addiction" is most commonly used to refer to a physiological state of dependence caused by the habitual use of drugs, alcohol, or other substances. Addiction is characterized by uncontrolled craving, increased tolerance, and withdrawal symptoms when deprived of access to the addictive substance. Addictions afflict millions of people in the United States alone. Addiction results from an incessant need to combat the negative side effects of a substance or situation by returning to that substance or situation for the initial enhancing effect. The desire for drugs such as heroin, cocaine, or alcohol all result from a need to suppress the low that follows the high. Addiction and addictive substances have long been a part of human culture. The use of alcoholic beverages, such as beer, was recorded by the ancient Egyptians. The Romans and other early civilizations fermented, drank, and traded in wine. The infamous "opium dens" of the Far East offered crude opium. The discovery of America was accompanied by the discovery of tobacco, grown by the indigenous population. Addiction today, especially addiction to illegal drugs, takes a heavy toll on modern society. Illegal drugs are easy enough to obtain, but they have a high price. In order to get money to feed their addiction, some addicts resort to theft or prostitution. Aside from criminal damage, addiction disrupts families and other social institutions in the form of divorce, abuse mental and physical, and neglect. There are two classifications for addiction: While dependency on substances that are ingested or injected is more commonly discussed, there are a number of nonchemical addictions that can lead to equally devastating lifestyles.

**Additional Topics**

**Addiction - Chemical Addictions** Chemical addiction is the general description for an addiction to a substance that must be injected or ingested. Alcohol, opiates, and cocaine are the most common of these chemicals. Though each of them is addictive, they have different effects on the body. Addiction to alcohol, for example, may be the result of heavy drinking coupled with a malfunctioning type of cell in the liver of the alcoholic.

**Addiction - The Nonchemical Addictions** Addictions can involve substances or actions not including addictive chemicals. Some of these addictions are difficult to define and may seem harmless enough, but they can destroy the lives of those who cannot escape them. Gamblers begin as most others do, by placing small bets on horses.

**Addiction - The Addict** Because addictive behavior has such serious effects on the health and social well being of the addict and those around him or her, why would anyone start? One characteristic that marks addicts, whether to chemicals or nonchemical practices, is a low sense of self esteem. The addict may arise from any social or economic situation, and there is no way to discern among a group of people who will become.

**Addiction - Treatment Of Addiction** Habitual use of an addictive substance can produce changes in body chemistry and any treatment must be geared to a gradual reduction in dosage. Initially, only opium and its derivatives morphine, heroin, codeine were recognized as addictive, but many other drugs, whether therapeutic for example, tranquilizers or recreational such as cocaine and alcohol, are now known to be addictive. Content on this website is from high-quality, licensed material originally published in print form. Paste the link into your website, email, or any other HTML document.

**Chapter 5 : Addiction - body, used, water, life, chemical, form, energy, system, effects**

*Although such behavioral addictions do not involve a chemical intoxicant or substance, a group of researchers have posed that some core indicators of behavioral addiction are similar to those of chemical or substance addiction.*

Open in a separate window Based on the views of Peel and Griffiths behavior addiction like drug addiction includes the following components: However, the physical signs of drug addiction are absent in behavioral addiction. This assumption is also supported by several clinical experiences and scientific investigations. Therefore, several authors have postulated that the criteria of behavioral addiction are comparable with those of substance-related addiction. All in all, it seems appropriate to categorize excessively conducted behaviors which lead to suffering, as behavioral addictions. Cessation of the activity leads to the occurrence of unpleasant emotions or physical effects Conflict: The activity leads to conflict with others or self-conflict Relapse and Reinstatement: Resumption of the activity with the same vigor subsequent to attempts to abstain, negative life consequences, and negligence of job, educational or career opportunities. In instances when the individual reduces or stops a specific behavior, excessive fatigue, lifestyle changes, significantly reduced physical activity, deprivation and changes in sleep patterns, impatience, sexual deviations, violence, eating disorder and withdrawal symptoms ensue. Behavioral addiction risk factors have biological bases and some of them have been effectively treated by SSRIs. In this area psychiatrists and psychologists involved in the field of mental health should be aware of psychological problems caused by addictive behaviors, including symptoms such as anxiety, depression, aggression, and academic and career dissatisfaction. CONCLUSION Similar to substance abuse prevention programs aimed at addicted persons, specialized training can educate adolescents about the warning signs of online addiction in order to assist early detection. Parents should inform their children about the negative consequences of overuse of the Internet and its moral deviations, in order to prevent addiction. Parents should monitor their children while using internet and teach them the useful and appropriate methods of internet use. This helps adolescents self-monitor their online use without abusing it. Behavior science professionals might help adolescents understand the factors underlying their online habits and reintegrate former activities into their lifestyles and aid to prevent suspected cases of online abuse. It is important to know that prevention programs for online abuse can reduce the occurrence of future incidents and decrease risk of internet addiction. One of the important ways to prevent internet addiction, is to treat risk factors such as loneliness, stress, depression and anxiety, which may trigger the addiction to the internet and should be treated. Mental health professionals should encourage individuals who overuse the internet, to seek treatment when problems emerge, and help them identify ways they may be using the internet to escape from real life. Authorities and cultural institutions have a duty of providing healthy and proper usage of the internet to individuals, especially adolescents who are most vulnerable, via mass media education and training. Therefore, the most important step in this field is education and information We should realize, however, that filtering is necessary and can limit the abuse of internet using pornographic sites, etc but it is temporary. In the current situation, the government must invest in immunization, strengthening of religious beliefs and improving the sprit. It seems that in such ways the correct usage of the internet in the community will be naturalized. Much research must be done to show that educational training programs on internet addiction have proven effective in preventing new cases and improving the satisfaction and cohesion with internet using. Footnotes Conflict of Interest: Widyanto L, McMurrin M. The Psychometric properties of the internet addiction test. Peele S, Brodsky A. Internet fuels other addictions. Student Br Med J. A new clinical phenomenon and its consequences. The cognitive psychology of gambling. Pathological preoccupation with video games. The effect of computer and internet on child and adolescents. Pathological gambling, eating disorders, and the psychoactive substance use disorders. Negative addiction in runners. J Broadcast Electron Media. Internet use and collegiate academic performance decrements: Fundamentals and Perspectives, centre quebecois de lutte aux dependances Quebec. Widyanto L Laura, Griffiths M. Int J Mental Health Addict. Nicotine, tobacco and addiction. A cognitive-behavioral model of pathological Internet use, Computers in Human Communication. A survey Relationship between psychiatric symptoms and internet addiction disorder

in students of Isfahan universities. J Info Syst Educ. The relationship between depression and internet addiction. Should addictive disorders include non-substance-related conditions? Diagnostic instruments for behavioral addiction: Some contributions of the study of gambling to the study of other addictions. Gambling behavior and problem gambling. University of Nevada; An issue for everybody? Pre-publication copy of an article published in Employee Counselling Today. J Res Med Sci. Young, Treatment Outcomes with Internet Addicts.

**Chapter 6 : Account Suspended**

*Internet Addiction Test This item, self-reporting questionnaire, designed by Kimberly Young, assesses whether an individual has an Internet addiction. Taking about 10 minutes to complete, it is easily scored and no training is required.*

Soon after dinner, usually, the addict starts his pattern of using. From that moment until bedtime, he is mostly out of communication with his wife and family. He might even stay up later to use. When he stops, he feels worse than before he started, even though he says he uses it to help him relax. What is his drug of choice? He is an addicted television viewer. Maybe for some people it is a harmless diversion. They may protest that it is a harmless diversion, even as it sucks endless hours out of their lives. As a conservative estimate, Americans watch over three hours a day. I suspect that the pwADHD are watching even more. It is probably not a conscious and purposeful choice. Like many unproductive ADHD habits, television is an unplanned time-destroyer. Sometimes people realize that, in fact, it is having a negative influence, but they cannot manage to cut back their TV time. The content of TV is a separate question. Many viewers watch shows which they admit they do not like. Then there is the question of commercialism and anti-intellectualism that TV might encourage. And need we mention the routine violence and soulless sexuality? But aside from that, the mere fact of television being television is potentially addicting and time-destructive. Television operates in much the same way that chemicals do. It alters the brain. At first, like a drug, it really is relaxing. But with more watching it becomes a hook which hurts to stop using. After hours of watching television, many people feel quite a bit worse than when they started. But ADHD makes people more prone to television addiction in the same way that it makes people more vulnerable to other addictions. What are the remedies if you do decide that television is having a negative impact? Typical advice includes exercising willpower and self-discipline. This is a good idea, but I will forgive you if that advice seems to have limited usefulness. Television seems to create a state of mind that particularly resists mindful choice-making. It exacerbates the inability to direct oneself, augmenting ADHD symptoms. The strategies that make the most sense are similar to those that work with chemical addictions. First, it is important to admit that it has gotten out of control. Becoming conscious of the problem and its ramifications is critical. Many people have not really noticed the negative effects that television is having on them. It is helpful to see that others acknowledge how television can be negative. Once you are drinking, your ability to control your subsequent behavior is compromised. Furthermore, you have compromised some of the self-respect and self-confidence that could help you stop. It is often necessary to insist on total abstinence, at least temporarily. It is folly to keep paying the cable bill for just a few favorite programs. You really need to learn to build your life around something else. Another lesson from the world of chemical addictions is to use your friends. The support of others is invaluable in getting a grip on your uncontrolled behaviors. You will not likely find 12 step groups about television addiction. But try to surround yourself with people who support your efforts to stay away from the television. I suppose it would be fair to say that I am picking on television, when there are equally noxious non-chemical addictions that deserve the same treatment. There are people discussing gambling, sexual behavior, and even shopping in equivalent terms. Internet addiction has gotten even more press than television addiction. And the little games they put in cell phones can be a huge waste of time. Particularly for the pwADHD, there are countless ways we can get sucked into allowing a behavior to hijack our brains and steal our time and attention. My hope is to raise awareness of this possible area of trouble. If you can find nothing wrong with the amount and kind of television that you watch, maybe there is nothing wrong with it. But if you do see a glimmer of trouble in your tube-time, I hope this gives you the courage to address it more openly, and maybe make the changes that you would like to make.

**Chapter 7 : Are Behavioral Addictions the Same as Drug Addictions?**

*These numbers don't account for the non-chemical addictions that affect millions more. While the term addiction can be used liberally to describe a number of behaviors and habitual patterns, the true definition of addiction, according to the American Society of Addiction Medicine (ASAM), is as follows.*

Technology, the internet, and gambling". *Journal of Gambling Studies*. Olsen CM December Textbook of Anxiety Disorders. Retrieved 24 April It has been found that deltaFosB gene in the NAc is critical for reinforcing effects of sexual reward. Pitchers and colleagues reported that sexual experience was shown to cause DeltaFosB accumulation in several limbic brain regions including the NAc, medial pre-frontal cortex, VTA, caudate, and putamen, but not the medial preoptic nucleus. Next, the induction of c-Fos, a downstream repressed target of DeltaFosB, was measured in sexually experienced and naive animals. The number of mating-induced c-Fos-IR cells was significantly decreased in sexually experienced animals compared to sexually naive controls. Finally, DeltaFosB levels and its activity in the NAc were manipulated using viral-mediated gene transfer to study its potential role in mediating sexual experience and experience-induced facilitation of sexual performance. Animals with DeltaFosB overexpression displayed enhanced facilitation of sexual performance with sexual experience relative to controls. In contrast, the expression of DeltaJunD, a dominant-negative binding partner of DeltaFosB, attenuated sexual experience-induced facilitation of sexual performance, and stunted long-term maintenance of facilitation compared to DeltaFosB overexpressing group. Together, these findings support a critical role for DeltaFosB expression in the NAc in the reinforcing effects of sexual behavior and sexual experience-induced facilitation of sexual performance. *Psychological Research and Behavior Management*. Frasch, Martin Gerbert, ed. An fMRI study during a guessing task". *Journal of Psychiatric Research*. Evidence from a color-word Stroop task". Archived from the original PDF on 10 December Retrieved 18 July *Journal of Research in Medical Sciences*. Naltrexone, a mu-opioid receptor antagonist approved by the US Food and Drug Administration for the treatment of alcoholism and opioid dependence, has shown efficacy in controlled clinical trials for the treatment of pathological gambling and kleptomania 76â€™79 , and promise in uncontrolled studies of compulsive buying 80 , compulsive sexual behavior 81 , internet addiction 82 , and pathologic skin picking Topiramate, an anti-convulsant which blocks the AMPA subtype of glutamate receptor among other actions , has shown promise in open-label studies of pathological gambling, compulsive buying, and compulsive skin picking 85 , as well as efficacy in reducing alcohol 86 , cigarette 87 , and cocaine 88 use. N-acetyl cysteine, an amino acid that restores extracellular glutamate concentration in the nucleus accumbens, reduced gambling urges and behavior in one study of pathological gamblers 89 , and reduces cocaine craving 90 and cocaine use 91 in cocaine addicts. These studies suggest that glutamatergic modulation of dopaminergic tone in the nucleus accumbens may be a mechanism common to behavioral addiction and substance use disorders

## Chapter 8 : Behavioral Addictions Vs. Chemical Addictions | LoveToKnow

*Nonetheless, behavioral addictions and substance addictions both share the same association with changes in the neural pathway of the reward system in the brain. [19, 20] Similar neurocognitive deficits, like executive functioning, have also been identified between both disorders of substance addiction and non-substance-related addiction.*

These addictions are classified as "obsessive-compulsive and related disorders. Both addictive chemicals and addictive behaviors activate the reward pathway in the brain. In fact, the reward system exists so it can reinforce behaviors. Genetic Predispositions Both chemical and behavioral addictions can run in families. The FosB gene transcription is described as a risk factor in both types. According to researcher Timothy W. Fong , "Family members of pathological gamblers have an incidence of pathological gambling of close to 20 percent, a rate much higher than the rate in the general population. They are also similar in their symptoms. Similarities in Symptoms and Treatment Whether addicted to substances or behaviors, the addict: Is preoccupied with the source of his addiction, getting it and recovering from it Sacrifices personal relationships and responsibilities to pursue a high Feels ill at ease when unable to get high Continues to get high despite negative consequences While a person who is solely addicted to a behavior will not necessarily have to go through detox, after that step is done treatment is basically the same. The person needs to get to the root of his addictive behavior through exploration, either through individual or group therapy, develop healthy alternatives to the addiction and come up with a plan to avoid triggers and prevent relapse. For example, a shopping addict may need to cut up his credit cards and stay away from the mall, just like an alcohol may need to avoid the bar scene. Major Differences Behavioral addictions cannot always be dealt with using the abstinence-based approach favored by disease-model drug and alcohol counselors. In these cases, the person must learn to practice healthy moderation. Also, behavior addicts do not become physically dependent on their drug of choice. This makes it easier for them to hide their addictions because they do not have physical withdrawal symptoms. However, the emotional toll can be just as high, and in the case of eating disorders, the damage to the body as well. Comorbidity of Addictions A lot of addicts have both chemical and behavioral addictions, known as comorbidity. Addicts often replace one addiction with another as well -- switching from a drug to a behavior. For example, a person may develop an eating disorder as an unhealthy way to fill the void from giving up drinking. This helps the person avoid the emotional pain at the root of the addiction, which is why people in recovery must focus on healthy and pro-social behaviors. Was this page useful?

## Chapter 9 : Addiction Treatment Homework Planner - Google Books

*The following article has been published with kind permission from Lew Mills, PhD, MFT, a Bay Area psychotherapist working with Attention Deficit in Adults. Soon after dinner, usually, the addict starts his pattern of using.*