



Gambling disorder and sleep problems among young adults

What this research is about

Insomnia is linked to mental health problems, such as depression, anxiety, and suicide. It is also a risk factor for physical health problems and substance use disorders (e.g., alcohol and opiate use).

Gambling disorder (GD) is a mental health disorder characterized by excessive gambling. It is increasingly recognized as a serious public health concern. But there is not much research on the relationship between sleep disturbances, such as insomnia, and gambling behaviour. One study did find that people with problem gambling had worse sleep quality than people without problem gambling. The purpose of this study was to examine the link between gambling disorder and symptoms of sleep problems.

What the researchers did

The researchers used a subset of data collected for a previously published study. Participants were young adults between the ages of 18 and 29 years who had gambled at least 5 times in the past year.

The current study analyzed data collected on the following measures:

- The Structured Clinical Interview for Gambling Disorder, which assesses gambling disorder based on the DSM-5 criteria. People who scored 0 were considered 'controls', while those who scored between 1 and 3 had 'at-risk gambling' and those who scored 4+ had 'gambling disorder.'
- The Epworth Sleepiness Scale, which assesses the likelihood of falling asleep in eight situations. Scores of 10+ were considered to indicate excessive daytime sleepiness.

What you need to know

The purpose of this study was to examine the link between gambling disorder and symptoms of sleep problems. The researchers used a subset of data collected for a previously published study. The sample was 152 young adults from Chicago, USA, who were between the ages of 18 and 29 years, and gambled at least 5 times in the past year. Overall, participants with gambling disorder had more sleep disruptions and worse sleep quality. They also tended to have higher anxiety and depressive symptoms. Participants with at-risk gambling did not differ much from those without problem gambling, except for early insomnia (i.e., difficulty falling asleep).

- The Hamilton Anxiety Rating Scale (HAM-A) and Hamilton Rating Scale for Depression (HAM-D). Both scales include specific questions related to insomnia. The HAM-D has three items specifically related to sleep quality: insomnia – initial (difficulty falling asleep), insomnia – middle (waking and restlessness during the night), and insomnia – delayed (waking in the early hours of morning and not being able to fall asleep again). The HAM-A has one item that reflects global sleep disruption (e.g., broken sleep, nightmares, and trouble falling asleep).

The original sample included 579 young adults who were recruited from two metropolitan areas in midwestern USA. The original sample was recruited through media advertisements and word of mouth. The current study only included young adults with complete data for the above four measures. This

resulted in a sample of 152 young adults from the Chicago area.

What the researchers found

The average age of the participants was 25 years. Over half of the participants (55%) were male. About 41% were in the control group without problem gambling, while 32% had at-risk gambling and 26% had gambling disorder. Between the three groups, there were no significant differences in terms of marital status and sexual orientation. More males than females were in the gambling disorder group compared to the other groups. Participants with gambling disorder tended to be older than those in the control group.

The researchers found that a few participants in each of the three groups met the clinical cut-off score for excessive daytime sleepiness on the Epworth Sleepiness Scale (score of 10+). However, there was no significant difference across the groups. Also, none of the groups had an average score that indicated clinical significance on the Epworth Sleepiness Scale.

On average, participants with gambling disorder had higher total HAM-A and HAM-D scores than those in the at-risk gambling and control groups. The average score on the HAM-D was 12.03 for participants with gambling disorder. The average score on the HAM-A was 9.85. These scores indicate mild anxiety and mild depression.

Participants with gambling disorder scored higher on the HAM-D items related to insomnia than the control and at-risk gambling groups. This difference was particularly noticeable for middle and late insomnia. Participants with at-risk gambling differed from the control group on early insomnia only.

The HAM-A item reflects global sleep disruption. Scores on this item showed that participants with gambling disorder experienced more global sleep disruptions compared to the other groups.

Overall, this study found that people with gambling disorder have worse sleep quality and more sleep disruptions. They also tend to have higher anxiety and depressive symptoms.

How you can use this research

This study can inform gambling research and treatment. Practitioners can consider asking patients with gambling disorder about their day- and night-time routine as well as their sleep quality.

About the researchers

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Citation

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