

research snapshot

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Gambling disorder symptoms in relation to suicide

What this research is about

Gambling disorder (GD) is a serious disease that can affect some people and result in many negative consequences to their well-being. Usually, to determine if someone has GD, clinicians use the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). The DSM-5 assesses nine symptoms of GD. People who meet four of the nine symptoms are diagnosed with GD. The more symptoms they have, the more severe their GD is.

What makes GD more complex is the fact it co-occurs with other diseases. Past research has noted that people with GD might also experience alcohol and drug use problems, mood disorders, and even suicide. With regard to suicide, past studies have shown that GD increases the risk that people have suicidal ideation, attempts, and even death. Yet, there is limited knowledge regarding which symptoms of GD are associated with suicide. This study aimed to fill in this research gap by exploring which symptoms of the DSM-5 are associated with suicidal behaviours in people who visited a treatment centre in South Korea for their GD.

What the researchers did

The researchers recruited 142 patients from a GD treatment centre in South Korea. Most of the participants were male (98.6%). To meet the criteria for GD, participants completed the DSM-5 diagnostic tool. If they satisfied four or more of the nine criteria, they were diagnosed as presenting with moderate to severe GD. If participants met 2 to 3 criteria, they were considered to have subclinical (mild) GD.

To evaluate the severity of GD, researchers also used the Problem Gambling Severity Index (PGSI). The PGSI

What you need to know

This research examined the link between the DSM-5 symptoms of gambling disorder (GD) and suicide. The researchers recruited 142 patients who sought treatment for their GD at a treatment centre in South Korea. The results revealed that the number of symptoms was higher among those who reported suicidal ideation and past suicide attempts. Those with suicidal ideation were more likely to report negative impacts on life and 'bailouts' (i.e., seeking help for financial problems). Those with past suicide attempts were more likely to report preoccupation and gambling for relief from problems and bad moods. Bailouts remained a risk factor for suicidal ideation even after taking into consideration depressive mood. Gambling for relief remained a risk factor for past suicide attempts even after taking into consideration depressive moods.

examines problematic gambling behaviours and consequences (e.g., chasing losses, borrowing money, having health problems). Finally, to assess suicide risk, the researchers used direct questions (e.g., 'Are you thinking about suicide? Have you ever tried to commit suicide in the last month?'). To assess depressive mood, they asked about participants' mood in the last month.

What the researchers found

Results revealed that almost a third of the participants (27.5%, 39 participants) had suicidal ideation. Among these participants, seven of them had attempted suicide in the past. When the researchers explored the DSM-5 symptoms, the results showed that the

number of symptoms was higher among those with suicidal ideation and those who had previous suicide attempts. Also, participants with suicidal ideation reported more depressive mood than participants without suicidal ideation.

There were significant differences between people with suicidal ideation and those without on DSM-5 symptom 8 (impact on life including negative consequences in social and work areas) and symptom 9 (bailouts or asking for help due to financial problems). Participants with suicidal ideation were more likely to endorse these symptoms. In further analyses, the results suggested that ‘bailouts’ increased the risk for suicidal ideation even after taking into consideration depressive mood. Thus, financial problems were related to a higher suicide risk.

There were also significant differences between people who had past suicide attempts and those who had never attempted suicide on symptom 4 (preoccupation including withdrawal and restlessness when not gambling) and symptom 5 (relieve or using gambling to escape life problems or bad moods). Participants who reported past suicidal attempts were more likely to endorse these symptoms. In further analyses, the results showed that ‘relieve’ was a risk factor for suicide attempts even after taking into consideration depressive mood. In other words, people who used gambling as an escape were at higher risk for committing suicide.

How you can use this research

This research could be used by service providers and researchers. Service providers could use this information to develop prevention methods to educate the public about the risk of suicide among people with GD. Clinicians could use this information to assess for suicide risk when clients come in for help to treat GD. Addressing symptoms like ‘bailouts’ and ‘relieve’ could be incorporated into their treatment plans. Future research could examine the link between suicide and GD among non-patient population, in a sample with more female participants, and in other countries where gambling is not an illegal act.

About the researchers

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About Gambling Research Exchange (GREO)

Gambling Research Exchange (GREO) has partnered with the Knowledge Mobilization Unit at York University to produce Research Snapshots. GREO is an independent knowledge translation and exchange organization that aims to eliminate harm from gambling. Our goal is to support evidence-informed decision making in safer gambling policies, standards, and practices. The work we do is intended for researchers, policy makers, gambling regulators and operators, and treatment and prevention service providers.

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