

research snapshot

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Relationships between personality disorders, suicidal behaviours, and problem gambling severity

What this research is about

Past research has found higher rates of suicidal thoughts and suicide attempts among people with gambling disorder (GD). GD is also linked to many mental health conditions, including substance use, mood disorders, and personality disorders. A lot of research has found that mood disorders and substance use disorders are linked with suicidal behaviours in people with GD. These links show the need to better understand the relationships between GD, suicidal behaviours, and personality disorders. So far, little research has been done in this area.

There is evidence that suggests the need to study GD, suicidal behaviours, and personality disorders. Past research has found high rates of personality disorders among people with GD. Other research has found the risk of suicide to be higher among people with personality disorders. The current study explored the relationships between GD, suicidal behaviours, and personality disorders.

What the researchers did

The researchers used data from Wave 1 of the National Epidemiological Survey on Alcohol and Related Conditions (NESARC). The NESARC collected information from a large sample of U.S. adults, aged 18 years and older. For this study, participants were 13,543 adults who provided data on gambling behaviour and suicidal thoughts or suicide attempts. They also reported having some mood symptoms in their lifetime.

Participants reported their gender, age, race, relationship status, education level, job status and income. They completed the AUDADIS-IV, which assessed the 10 DSM-IV criteria for GD. Based on their

What you need to know

The current study analyzed data from a large community sample of adults in the United States. Compared to non-gamblers, the rates of suicidal thoughts and suicide attempts were higher in those at-risk of or who were experiencing problem gambling. People who were at risk of or had problem gambling also showed higher rates for a wide range of Axis II personality disorders. There was a stronger relationship between problem gambling severity and personality disorders in people with no suicidal behaviour than in those with suicidal behaviour. Among people with no history of suicidal thoughts or attempts, those with more severe problem gambling were more likely to have any personality disorder.

AUDADIS-IV scores, the researchers placed participants into one of three groups: non-gambling (NG); low-risk gambling (LRG); or at-risk/problem/pathological gambling (ARPG).

Participants answered questions about their lifetime suicidal behaviours. Based on their answers, they were placed into one of three groups: a history of suicide attempts; a history of suicidal thoughts, without any history of suicide attempts; and no history of any suicidal behaviour.

Participants completed some measures for DSM-IV Axis-II personality disorders. The researchers grouped the personality disorders by cluster-A (i.e., odd, eccentric cluster including paranoid and schizoid); cluster-B (i.e., dramatic, overly emotional including antisocial personality disorder and histrionic); and

cluster-C (i.e., anxious, fearful including avoidant, dependent, and obsessive-compulsive) disorders.

The researchers analyzed the differences in sociodemographic characteristics (age, gender, etc.) and rates of personality disorders according to problem gambling status. Then, they assessed the relationships between problem gambling severity and personality disorders according to suicide history. Lastly, they looked at each cluster of personality disorders separately.

What the researchers found

Almost one-third of participants had any Axis II personality disorder (28.31%). Participants with ARPG had higher rates of most personality disorders (except for dependent personality disorder) compared to non-gamblers. Participants with ARPG also had higher rates of suicidal thoughts or suicide attempts.

Among participants who did not have a history of suicidal behaviour, those with ARPG were more likely to have any cluster A personality disorder. Both participants with LRG and ARPG were more likely to have any cluster B personality disorder among those who did not have a history of suicidal behaviour. Both participants with LRG and ARPG were more likely to have any cluster C personality disorder among those who did not have a history of any suicidal behaviour.

The link between problem gambling severity and some Axis II personality disorders was strongest among those without a history of suicidal behaviour compared to those with such a history. This suggests that some of the relationship between more severe problem gambling and Axis II personality disorders is accounted for by increased risk of suicide.

How you can use this research

Clinicians could screen for gambling-related behaviours and problems among patients with certain personality disorders and suicidal behaviour. Future research could study the relationships between GD, suicidal thoughts and suicide attempts, and personality disorders over time. This could help determine which conditions might cause the others to occur.

About the researchers

Silvia Ronzitti is affiliated with the Yale School of Medicine in New Haven, CT, USA, and the Department of Medicine and Surgery at the University of Milano-Bicocca in Monza, Italy. **Shane W. Kraus** is affiliated with the Edith Nourse Rogers Memorial Veterans Hospital in Bedford, MA, USA. **Rani A. Hoff** is affiliated with the Northeast Program Evaluation Center at the National Center for PTSD in West Haven, CT, USA, and the Department of Psychiatry at Yale University School of Medicine in New Haven, CT, USA. **Massimo Clerici** is affiliated the Department of Medicine and Surgery at the University of Milano-Bicocca in Monza, Italy, and the Department of Mental Health at San Gerardo Hospital in Monza, Italy. **Marc N. Potenza** is affiliated with the Departments of Psychiatry and Neuroscience at Yale University School of Medicine in New Haven, CT, USA. For more information about this study, please contact Silvia Ronzitti at silvia.ronzitti@yale.edu.

Citation

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