

research snapshot

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Naltrexone as a treatment for pathological and problem gambling

What this research is about

Problem gambling is defined as repetitive gambling behaviour that leads to negative consequences. Past research has found support for certain drugs as a “last resort” to treat problem gambling when other types of treatment, such as counselling and behavioural therapies, have failed.

Some studies suggest that naltrexone has the most potential as a drug treatment for problem gambling. Naltrexone is an opioid antagonist which works by blocking the binding of opioids produced by the brain. Opioids elevate mood and relieve pain. Naltrexone is an approved treatment for alcohol and opiate dependence. It has also been shown to reduce gambling outcomes. However, there has been no research in the UK on the use of naltrexone in problem gambling treatment.

The current case series investigated the potential positive and adverse effects of using naltrexone to treat individuals with problem gambling.

What the researchers did

The researcher reviewed the case files of 1,192 patients who attended the National Problem Gambling Clinic in the UK between January 2016 and June 2017. Seventeen of the patients were eligible for treatment with naltrexone. These patients had severe gambling problems as measured by the Problem Gambling Severity Index (PGSI). They all had received psychological therapy for problem gambling with limited success. In order to safely take naltrexone, patients must have normal liver and renal function tests and be able to avoid abuse of alcohol during treatment.

What you need to know

This study examined the effects of naltrexone as a treatment for problem gambling. All 10 patients showed a decrease in their cravings to gamble after taking 50 mg/day of naltrexone for six weeks. Six patients were able to give up gambling completely during the treatment period, with another two patients reducing their gambling almost completely. Two patients with co-existing alcohol use disorder relapsed during treatment. One patient relapsed after the treatment period. Many patients experienced side effects, although most side effects resolved within the first week.

Out of the 17 patients, 14 started treatment with naltrexone. They received 25 mg of naltrexone per day for three days, and then 50 mg of naltrexone per day. Patients were told about the potential side effects of naltrexone. They also received information on other gambling support services, such as Gamblers Anonymous.

Before starting treatment, patients completed the Gambling Craving Scale (GCS), which measures the strength of their cravings to gamble. After six weeks of taking naltrexone, the researchers called the patients to complete another GCS. Patients also reported any side effects and unintended treatment outcomes. The researchers recorded if patients had any other mental disorders and addictions, their gambling history, and their history of past treatments.

What the researchers found

Of the 14 cases, 10 provided enough information about their treatment with naltrexone to be analyzed.

There were eight male patients and two female patients, ranging in age from 29 to 56 years. They had a gambling career that ranged from three to 40 years and many had significant debts due to their gambling losses. All of the patients had already completed or attempted to complete another type of gambling treatment. These included self-exclusion, counselling, and Gamblers Anonymous. All patients had previously attended psychotherapy or cognitive behavioural therapy.

Eight of the 10 patients had a co-existing mental disorder (e.g., schizophrenia, depression, ADHD). Six patients were taking medication to treat their mental disorders. All of the patients had painful social history, including family breakdown, emotional or sexual abuse, and homelessness. Four patients had a history of illegal activity to fund their gambling.

After taking naltrexone for six weeks, all 10 patients had reduced cravings to gamble. Of the 10 patients, six were able to give up gambling completely for the whole treatment period, although one relapsed after the treatment period ended. Of the four who were not able to give up gambling, gambling behaviour was reduced in two patients. Two patients relapsed during treatment. One patient started heavy drinking again and stopped taking naltrexone. The other could not give up heavy drinking and was advised to stop taking naltrexone for health reasons due to serious side effects.

The reported side effects of naltrexone were: loss of appetite, stomach pain, feeling “spaced out”, headaches, nausea, dizziness, and vivid dreams. Most of the side effects resolved within the first week. Unintended treatment outcomes were: reduced anger, reduced impulsiveness, improved mood, improved concentration, less urge to over-exercise, less interest in overeating, and increased calmness.

How you can use this research

This study provides insight into the use of naltrexone in the treatment of problem gambling. Researchers could study the effectiveness of naltrexone over a longer period of time, especially after patients stop taking naltrexone. Researchers could also compare

the treatment effects of naltrexone to other opioid antagonists on problem gambling.

About the researchers

Sophie Ward, Neil Smith and Henrietta Bowden-Jones are affiliated with the National Problem Gambling Clinic at the Central and North West London NHS Foundation Trust in London, UK. Sophie Ward is also affiliated with the Institute of Medical and Biomedical Education at St. George’s University of London in London, UK. Henrietta Bowden-Jones is also affiliated with the Faculty of Medicine at Imperial College of London in London, UK. For more information about this study, please contact Sophie Ward at m1700129@sgul.ac.uk.

Citation

Ward, S., Smith, N., & Bowden-Jones, H. (2018). The use of naltrexone in pathological and problem gambling: A UK case series. *Journal of Behavioral Addictions*, 7(3), 827-833.

<https://doi.org/10.1556/2006.7.2018.89>

Study Funding

This study was funded by Central and North West London NHS Foundation Trust.

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