If their gambling continues to bring harmful consequences to their lives and they continue to engage in gambling, that’s an addiction.  
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Men and women with gambling disorder, they experience all sorts of things that people who gamble recreationally do not.  
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It isn’t so much how much you gamble or how often or how much you’ve lost, it’s what are the consequences and what are the biological and psychological and social experiences it is for the person who is gambling?  
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Gambling disorder now in 2023, and it really is going back to 2013 was moved from the impulse control disorders section into the substance-related and addictive disorders section in the DSM-5.  
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It is an addiction.  
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These are emerging conditions of study that are super important, but gambling disorder and previously known as problem gambling, compulsive gambling, pathological gambling, is pretty certain now that it is an addictive disorder because of the science that we have accumulated.  
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We know that lifetime prevalence rates of gambling disorder hovers around 1% to 2% of the general population.  
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Within the last 12 months, depending on where you are in America or across the world, that last year 12-month prevalence rate can be as high as 3% to 6% or as low as .1 to 1%.  
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Gambling disorder in terms of prevalence is something that’s not rare. It’s there and it’s prevalent, it’s just not discussed.  
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Because we don’t screen for it? But more importantly, patients don’t like to talk about it.  
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One of the easy ways of screening is to ask patients about their spending on entertainment and if they have spent money in a gambling setting such as a casino, a racetrack, or online.  
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The bottom line is, these are emerging conditions of study that are super important, but gambling disorder and previously known as problem gambling, compulsive gambling, pathological gambling, is pretty certain now that it is an addictive disorder because of the science that we have accumulated.  
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The longer patients stay in treatment, the better they do.  
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Cognitive-behavioral therapy and motivational interviewing are effective psychotherapies for gambling disorder.  
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Gamblers Anonymous is a critical component of the treatment plan, but it should not be the only part.  
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There are state-funded treatment programs for gambling disorder that provide no-cost treatment for individuals and their family members.  
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Primary care providers and mental health providers can refer patients to specialized treatment programs or telehealth options for gambling disorder.  
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For non-experts, it is important to recognize that gambling disorder is a specialty condition and to seek additional training and resources.  
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Primary care providers and mental health providers should focus on building a treatment network and referring patients to specialized treatment programs.  
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Building a strong therapeutic alliance with patients is crucial in treating gambling disorder.  
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It's important to ask about gambling behavior and its impact on emotional and psychiatric health, as money is closely tied to gambling behavior.  
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For psychiatrists, it is important to recognize the prevalence of gambling behavior and its impact on mental health, and to incorporate screening for gambling disorder into practice.  
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