

Psychology - lecture notes

ADDICTION

Addiction WHO,1981

Dependence syndrome – a cluster of physiological, behavioral, and cognitive phenomena in which the use of a substance or a class of substances takes on a much higher priority for a given individual than other behaviors that once had a higher value.

Addiction, habit, compulsion

Addiction – continued involvement with a substance or activity despite ongoing negative consequences

- physiological aspect
- psychological aspect

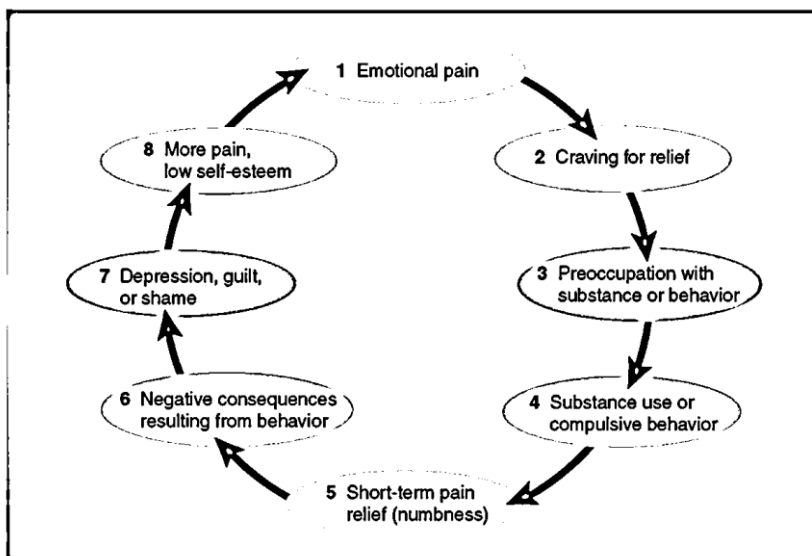
Habit – repeated behavior in which the repetition may be unconscious

Compulsion – similar to habit, but considerable discomfort is experienced if the behavior is not performed

Alarming symptoms

Distress Lost control Withdrawal Tolerance Desire
Life Problems Importance

Cycle of psychological addiction



DSM-V Substance related and addictive disorders

- **10** separate classes of drugs: alcohol, caffeine, cannabis, hallucinogens, inhalants, opioids, sedatives, hypnotics, and anxiolytics, stimulants (amphetamine-type substances, cocaine) and other (or unknown) substances
- Gambling disorders
- Internet gaming
- No sex, exercise, shopping addiction...yet

ALCOHOL USE DISORDER

A. A problematic pattern of alcohol use leading to clinically significant impairment or distress, as manifested by at least two of the following, occurring within a 12-month period:

1. Alcohol is taken in larger amounts or over a longer period than was intended
2. There is a persistent desire or unsuccessful efforts to cut down or control alcohol use
3. A great deal of time is spent in activities necessary to obtain alcohol, use alcohol, or recover from its effects
4. Craving, or a strong desire or urge to use alcohol
5. Recurrent alcohol use resulting in a failure to fulfill major role obligations at work, school, or home
6. Continued alcohol use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of alcohol
7. Important social, occupational, or recreational activities are given up or reduced because of alcohol use.
8. Recurrent alcohol use in situations in which it is physically hazardous.
9. Alcohol use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by alcohol.
10. Tolerance, as defined by either of the following:
 - a. A need for markedly increased amounts of alcohol to achieve intoxication or desired effect.
 - b. A markedly diminished effect with continued use of the same amount of alcohol.
11. Withdrawal, as manifested by either of the following:
 - a. The characteristic withdrawal syndrome for alcohol
 - b. Alcohol (or a closely related substance, such as a benzodiazepine) is taken to relieve or avoid withdrawal symptoms.

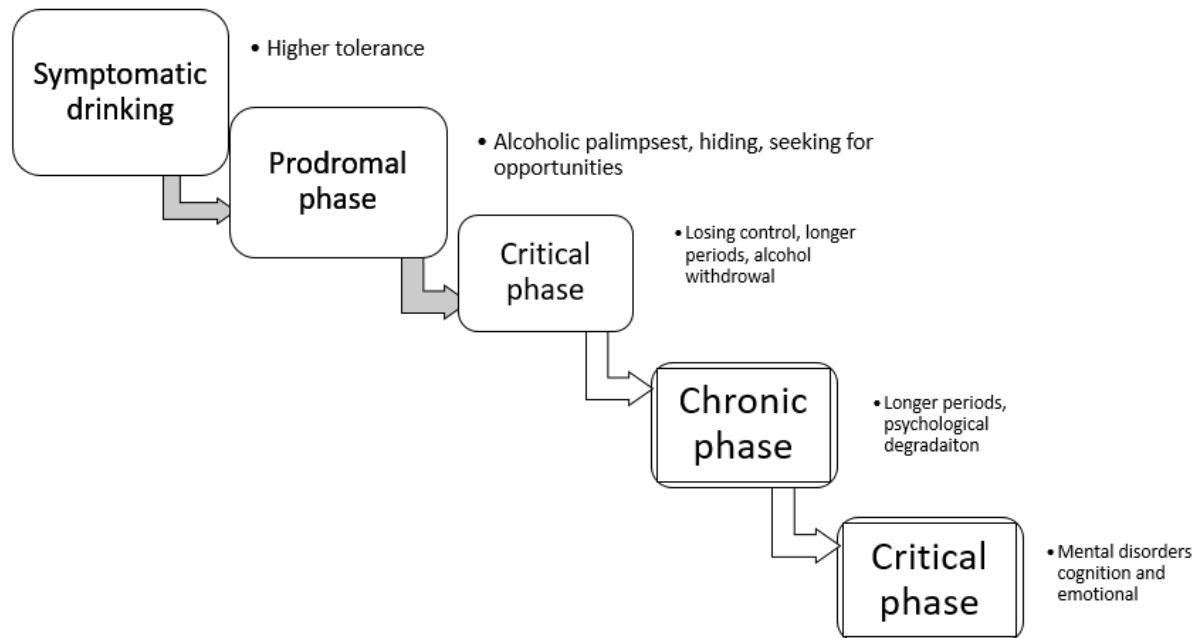
ALCOHOL WITHDRAWAL

A. Cessation of (or reduction in) alcohol use that has been heavy and prolonged.

B. Two (or more) of the following, developing within several hours to a few days after the cessation of (or reduction in) alcohol use described in Criterion A:

1. Autonomic hyperactivity (e.g., sweating or pulse rate greater than 100 bpm).
2. Increased hand tremor.
3. Insomnia.
4. Nausea or vomiting.
5. Transient visual, tactile, or auditory hallucinations or illusions.
6. Psychomotor agitation.
7. Anxiety.
8. Generalized tonic-clonic seizures.

- C. The signs or symptoms in Criterion B cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- D. The signs or symptoms are not attributable to another medical condition and are not better explained by another mental disorder, including intoxication or withdrawal from another substance.



THEORIES OF SUBSTANCE ABUSE

- Prior to the 1900s – theory of acquired inheritance (alcoholism familial, being passed on to children)
- Psychoanalytic theories
- Behavioral theories

Behavioral theories

Underlying belief that much of human behavior is learned

Factors:

past learning experiences (in and out family)

styles of drinking

environmental cues

thinking patterns that interact to produce the behavior...

Cognitive and social learning theories

Beck (1976)

maladaptive thinking patterns associated with drinking:

- a mind set that problems are unresolvable
- expectations that social drinking will help make friends

Social learning theories

emphasise the role of a life script that addicts learn in their communities of origin, that is reinforced by peers

the script becomes internalized and forms a part of the individual's life style

Psychological risk factors for addiction

- Low self-esteem and self-knowledge
- Low self control/ external locus of control
- Emptiness, lack of sense and purpose
- No interpersonal and coping skills
- No control over emotions, rumination, reduced ability to experiencing positive emotions
- Lack of interests
- No system of values
- Specific personality problems (immaturity, timidity, personality disorders)
- Family (lack of ties, social support, family experiences)
- Life events/ psychological crisis
- Society