

INTERNET GAMING DISORDER OR INTERNET ADDICTION?  
A PLEA FOR CONCEPTUAL CLARITY

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The Internet has positively revolutionized our lives: it facilitates interactions across gender, race, social classes and geographic boundaries. Moreover, it sustains culture and democracy through the sharing of knowledge and information (Schimmenti and Caretti 2010). However, there is a dark side of the coin, i.e. the psychiatric symptoms related to Internet abuse and addiction. Research has shown that Internet abuse is associated with a plethora of symptoms, including depressive feelings, social withdrawal, anxiety, lack of concentration, insomnia and dissociation, among others. These symptoms have been increasingly observed in clinical practice (Block 2008), so the identification of a proper diagnostic category for their assessment is imperative for both prevention and treatment.

In Section III (Emerging measures and models) of the latest DSM edition (DSM-5; APA 2013), Internet Gaming Disorder (IGD) is recognized as a condition that requires further study. IGD is described as a “persistent and recurrent use of the Internet to engage in games, often with other players, leading to significant impairment or distress” (p. 795). However, when the DSM-5 describes the diagnostic features of the disorder, it is stated that IGD is “(...) also commonly referred to as *Internet use disorder*, *Internet addiction*, or *gaming addiction*” (p. 796, original italics).

This assertion is confounding for two reasons. At clinical level, Internet-related symptoms have been demonstrated to be associated with the misuse of different Internet services alongside online games, including social networks (La Barbera, La Paglia, and Valsavoia 2009) and pornographic sites (Ross, Månsson and Daneback 2012). Consequently, at epistemological level, it is questionable whether a higher-order construct, such as Internet addiction, can be considered at the same level of one of its lower-

order facets, i.e. the IGD.

A quick consultation of the Pubmed database of articles indexed under the keywords “Internet gaming disorder”, “Internet use disorder”, “Internet addiction”, and “gaming addiction” confirms that the IGD diagnosis is not representative of the psychiatric problems associated with the misuse of the Internet. In fact, at the date of March 15, 2014, Pubmed reported only 9 records for “Internet gaming disorder” and 26 for “gaming addiction”. On one hand, this result was expected as the DSM-5 was published in 2013; on the other, this finding clearly shows that the specific construct of IGD has no research tradition. Even the “Internet use disorder” diagnosis has no research tradition, while being retrieved in only 6 articles. By contrast, Pubmed reported a total of 428 records for “Internet addiction”, with 185 articles (43.2%) being published in 2013. Similar results were obtained by searching the Scopus database: there were 1081 records indexed under the “Internet addiction” keyword, compared to 58 under “gaming addiction”, 9 under “Internet gaming disorder”, and 8 under “Internet use disorder” keywords.

Undoubtedly, the theoretical problems related to the identification of a proper diagnostic category for the Internet-related symptomatology cannot be solved entirely by exploring the scientific databases. Moreover, before a diagnostic category directly linked to the pathological use of Internet may become meaningful for clinical practice and prevention, other relevant questions are still open concerning its definition, specificity and sensitivity. For example, researchers who work in the field are aware that the psychiatric symptoms related to Internet misuse are also referred to as “problematic Internet use” (94 records in Pubmed), “excessive Internet use” (50 records), “compulsive Internet use” (31 records), and “pathological Internet use” (23 records).

Therefore, the DSM-5 work group was correct in stating that the literature suffers from a “lack of standard definition” (p. 796) for IGD, and this also applies to other definitions of the Internet-related symptomatology. Nonetheless, it is rather clear that the diagnostic category of Internet addiction is more consistent with research findings than IGD. Furthermore, a diagnosis of Internet addiction would be even more meaningful for clinical purposes, because it would focus on the pathological “diet” (Bowman et al. 2012) of the Internet, regardless of the services which a patient is addicted to (which may however be included as “specifiers”).

A consistent body of research has shown the potential harmful effects caused by misuse of the Internet (Cash et al. 2012), thus the identification of a diagnostic category concerning the pathological use of the Internet seems necessary at this stage. Nevertheless, the name, definition and criteria for such disorder should be determined to reflect current research on the topic, psychiatric tradition, and practical issues in clinical work.

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