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Response of Patients with Pathological Gambling to Treatment Depending on their Personality

During psychological treatment many patients with pathological gambling relapse or dropout. In this study we aim to find out predictors of these two factors of therapeutic failure, focusing on personality characteristics and their relationship to the outcomes of the therapy. Our results show that patients with pathological gambling score higher than healthy controls on Neuroticism and those that are more impulsive are more likely to relapse or discontinue treatment.

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Pathological gambling, now called gambling disorder on the new version of the *Diagnostic and Statistical Manual of Mental Disorders*, is a disease with a prevalence between 0.4% and 7.6% in general population. Most individuals with this disorder refer having problems with one or two types of gambling, although some of them are involved in many other forms of gambling. The onset of this disorder can occur during adolescence, but it can also be found in adulthood. A game pattern that gradually increases the frequency and the economic value of the stakes can be seen in most people who develop this disorder.

In pathological gambling, dropping out from treatment or relapse is very common. In both cases, this implies an inefficient use of existing health resources, with higher costs at short and long

term. Therefore, the knowledge about which personality variables would predict treatment failure can benefit the affected patient by helping to reduce dropouts and/or relapses, and in addition to reduce economic costs. Considering this, the aim of this study was to find out which personality variables differentiate pathological gamblers from healthy controls, and which personality traits may predict relapse or treatment dropout.

The scores in a personality questionnaire (Zuckerman-Kuhlman Personality Questionnaire, ZKPQ) of 44 patients with pathological gambling were compared to the scores of 88 healthy subjects. The results show that the former had higher scores on Neuroticism. All patients attended an open program of cognitive-behavioral therapy for one year. At the end of it, patients who responded well to treatment (they were abstinent) were compared with the ones who had either relapsed or dropped out from therapy. The results showed that those patients who relapsed or dropped out were more impulsive and more "sensation seekers". On the other hand, impulsivity was a good predictor of treatment failure, defined as relapse or dropout from therapy.

If at the beginning of a treatment, a clinical psychologist would assess the personality characteristics of the patients with an instrument like the ZKPQ, we could identify subjects at high risk of therapeutic failure. Such information is crucial to tailor the intervention to the patient's idiosyncrasy, and to obtain greater efficiency and effectiveness from psychological treatments.

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References

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