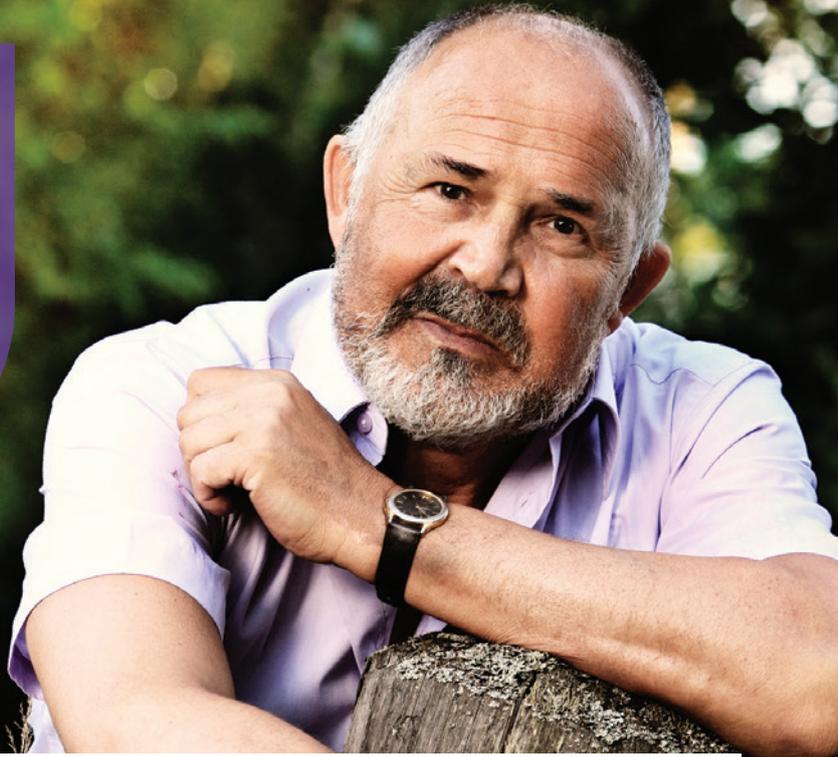




## What General Practitioners Should Know About Gambling



*For many Australians gambling is an enjoyable pastime and an established part of our culture. Most of us gamble responsibly. However, in South Australia an estimated 5,000 adults have a problem with gambling and another 15,000 adults are deemed 'moderately at risk'. For each person with a gambling problem, it is estimated that a further 5-7 family members and others are negatively impacted.<sup>1</sup>*

Approximately 82% of Australians aged 15 years and over consulted a general practitioner at least once in 2011.<sup>2</sup> Therefore, you are well placed to detect problem gambling and initiate treatment. Whilst a patient is unlikely to admit to the problem or confide in others, professionals working in general practice may be one of the few groups whom those with a gambling problem trust or are willing to visit.

A conversation with a general practitioner may be the first step towards identifying problem gambling and working together towards effective management.

The 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) released in May, 2013 has officially registered problem – or pathological – gambling as an addiction.

Multiple studies also show that problem gambling is strongly co-morbid with other physical and mental health problems with high burdens of disease, particularly depression, anxiety, substance abuse and nicotine dependence.<sup>3</sup> Understanding the functional relationship between problem gambling and any co-morbidity is critical for effective treatment, as the presence of a co-morbid disorder may influence the selection and impact of treatment.

Although other health issues such as substance abuse affects many more people than gambling, problem gambling has no physiological limit. Problem gambling can develop suddenly and spiral out of control within a very short timeframe.

Losses from gambling can result in the person, their partner and their families having their livelihoods and health completely destroyed. Early diagnosis and treatment can help to eliminate these extreme outcomes and general practice is again best placed to detect problem gambling and initiate treatment.

<sup>1</sup> Thomas, S. A., Piterman, L., & Jackson, A.C. (2008). Problem gambling: what general practitioners need to know and do about it? *Medical Journal of Australia* 189, 135-136.

<sup>2</sup> Patient Experiences in Australia. (2011). *Australian Bureau of Statistics*, 4839.0.

<sup>3</sup> Petry, N. M., Stinson, F., & Grant, B.F. (2005). Comorbidity of DSM-IV pathological gambling and other psychiatric disorders: results from the National Epidemiologic Survey on Alcohol and Related Conditions. *Journal of Clinical Psychiatry*, 66, 564 – 574.

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## Who is at risk?

Recognising patients who are at risk of problem gambling is vitally important.

Particularly vulnerable groups include:

- People with a 'severe mental disorder' as defined by scores in the Kessler K10
- People from culturally and linguistically diverse communities
- Aboriginal and Torres Strait Islander people
- Employees of gaming and gambling venues
- Women experiencing loneliness, grief or trauma with co-existing anxiety and depression
- Younger males who report significant stress, anxiety and financial problems without any obvious indicators of substance abuse
- Middle-aged males with difficulties with substance abuse.

## Why do people gamble?

It is now recognised that people develop a gambling problem via different pathways. Some grow up in families that gamble. Some truly believe that they have a system to win money. Others gamble to escape depression, stress or anxiety. Sometimes problem gambling coincides with other problems such as substance abuse, mental illness, violence and crime.

## Help seeking behaviour

Unfortunately very few people will seek help for a gambling problem. Much of this reluctance can arise from denial, shame and the secretive nature of gambling.

It is common for people to only seek help when they are desperate – usually when they are suicidal, lose their assets, suffer relationship breakdowns or face sentencing for a crime triggered by their problem gambling.

**Problem gambling is characterised by difficulties in limiting money and/or time spent on gambling which leads to adverse consequences for the gambler, others, or for the community.**

*Source: Neal, Delfabbro and O'Neill, 2005<sup>4</sup>*

## Advice from the AMA

Medical practitioners should be aware of the potential adverse impacts of problem gambling on the physical and mental health of individuals and their families. Patients with problem gambling may present with symptoms that appear unrelated to gambling. Other patients may present with health-related concerns arising from a family member's gambling problem.

Medical practitioners should consider including gambling as part of their systematic lifestyle risk assessment when taking a medical history.

Where relevant, a shared-care approach to the case management of people with gambling problems and their families may be developed. The general practitioner can be assisted by community agencies such as gambling intervention and counselling services, community mental health, relationship counselling, alcohol and drug services, financial advisory services and legal services.

*Source: AMA Position Statement – The Health Effects of Problem Gambling 2013*

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Thomas, S. A., Piterman, L., & Jackson, A.C. (2008). Problem gambling: what general practitioners need to know and do about it? *Medical Journal of Australia* 189, 135-136.

Thomas, S.A., Jackson, A.C., Browning, C.J., & Piterman, L. (2009). A one item screening tool for problem gambling for use in primary care settings. *Problem Gambling Research and Treatment Centre, Melbourne University.*

<sup>4</sup> Neal, P., Delfabbro, P., O'Neill, M. (2005). Problem gambling and harm: Towards a national definition. *Gambling Research Australia, Melbourne.*