



# ICD-11游戏障碍产生过程、内涵与外延

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# 大 纲



- 行为成瘾的概念
- 游戏障碍的由来
- 游戏障碍的内涵
- 游戏障碍的外延
- 小结与展望



# 行为成瘾的概念

# 化学物质成瘾（依赖）的核心表现



- 失去控制：不能控制使用药物剂量、频度、时间，尽管有不良后果，仍在继续使用，反复戒断、反复失败；
- 渴求
- 耐受性增加
- 戒断症状

# 行为成瘾(behavioral addiction)的概念



- 不依赖于酒精或成瘾的化学物质的一种成瘾形式，也被称为非物质相关障碍 (non-substance related disorders) (Albrecht et al., 2007)
- 正常、愉快的活动转变为反复出现的适应不良行为，个体不能有效控制行为冲动，行为频繁发生，达到了害人、害己的程度。

# 行为成瘾种类



- 网络成瘾
- 赌博障碍
- 狂吃 (binge eating)
- 囤积、皮肤搔抓、拔毛狂
- 拔毛、纵火偷窃狂
- 购物
- 性
- 观看色情节目
- 钓鱼
- 工作
- 体育锻炼
- .....

(Petry, 2006; Holden, 2001)

# 网络成瘾 (Internet Addiction)



- 网络成瘾：对网络内容过度的或控制不良的关注及欲求，并导致的损害或痛苦。
- 至少包含4种亚型：网络游戏；网络色情；网络关系；网络信息搜索。
- 对移动设备（例如智能手机）及社交网站（例如微信、微博、Facebook、Twitter、博客）成瘾的研究日益增多。



# 网络相关问题的名称



- 网络成瘾 (Internet Addiction)
- 网络成瘾障碍 (Internet Addiction Disorder, IAD)
- 网络过度使用 (Internet Overuse, IO)
- 网络误用 (Internet misuse)
- 网络滥用 (Internet abuse)
- 网络狂 (Netaholic)
- 计算机依赖 (Computer Dependency)
- 上网依赖 (Online Dependency)
- 网络成瘾 (Cyberaddiction)
- 病态网络使用 (Pathological Internet Use, PIU)
- 病理性使用电子媒介产品 (Pathological use of electronic media and devices)



# 为什么网络容易成瘾？



- 双重 ACE
  - **Accessibility** (可及性)
  - **Control** (控制)
  - **Excitement** (兴奋)
  - **Anonymous-disinhibition** (匿名-脱抑制)
  - **Convenience** (便利)
  - **Escape** (逃避)
- 内容
  - 网络游戏
  - 网络色情
  - 网络关系
  - 网络信息

# “在互联网上，没人知道你是一条狗”





**“Internet will potentially lead to  
addictive behavior among users.”**

**American Psychological Association  
1976**



# 美国分类（DSM）系统关于行为成瘾的分类

# DSM-5主要内容

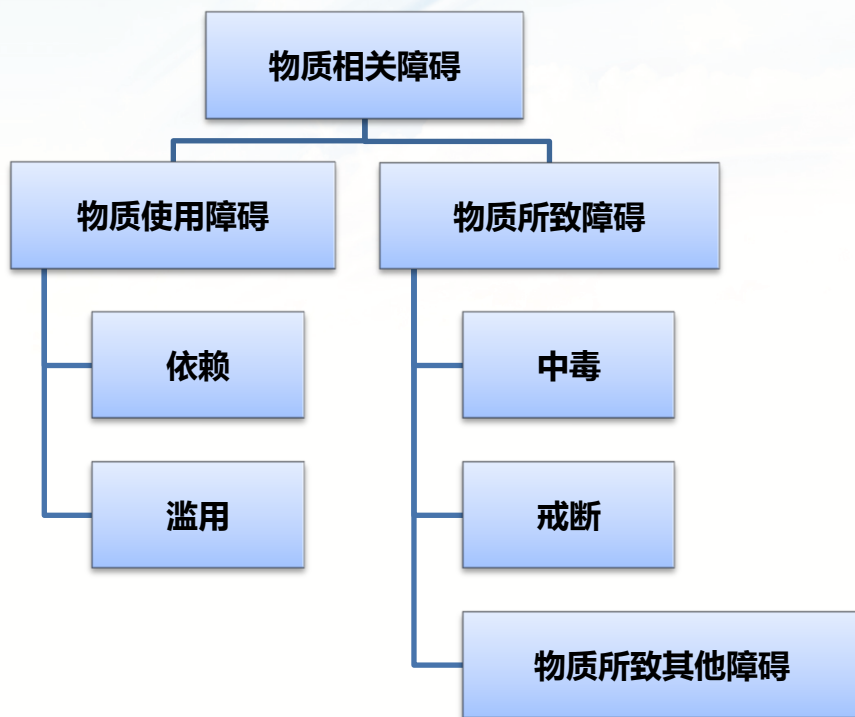


- ***Section I: DSM-5 Basics.*** Introduction. Use of the Manual. Cautionary statement for forensic use of DSM-5.
- ***Section II: Diagnostic Criteria and Codes.***
- ***Section III: Emerging Measures and Models.***
  - Assessment measures.
  - Cultural formulation.
  - Alternative DSM-5 model for personality disorders.
  - **Conditions for further study.**
- ***Appendix.*** Highlights of changes from DSM-IV to DSM-5. Glossary of technical terms. Glossary of cultural concepts of distress. Listing of DSM-5 diagnoses.

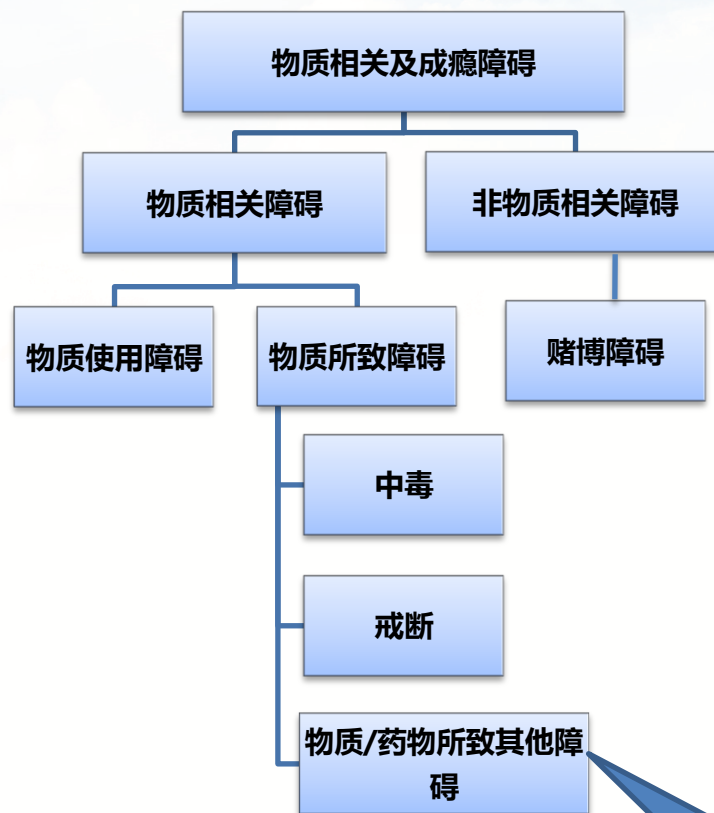
# DSM-IV与DSM-5：物质相关障碍 内容结构对比



## DSM-IV



## DSM-5



放在其他章节  
分类





# 行为成瘾进入国际疾病分类 (ICD-11) 的进程与挑战



# WHO/WPRO 2005年准备成立有关网络相关问题工作小组



World Health  
Organization

## WHO WORKING GROUP ON INTERNET MISUSE AND RELATED MENTAL HEALTH PROBLEMS IN YOUTH

### PART I

#### 1. Background information

Internet represents the spearhead of the industrial revolution. This new technology changes million people's life styles and promises new and better ways of communications. However, the combination of available stimulating, ease of access and escape, convenience, low cost, visual stimulation, disinhibition, autonomy and anonymity—all contribute to a highly psychoactive experience, seems to be at best easily overused/abused, and at worst, addictive (Greenfield, 1999), and would have negative impact on mental health, especially in young people.

As early as in 1976, the year after the Internet came into being, the American Psychological Association had anticipated that the Internet would potentially lead to addictive behaviour among users. The psychology community was asked to develop policy guidelines for counseling persons who may become addicted to the Internet (APA, 1976). As a mental health problem, the common contributing factors and consequences can be similar to that of alcohol addition, drug abuse, compulsive gambling, chronic overreacting behavior, sexual compulsions, and obsessive viewing of television (Liu et al., 2004).

The usage of the Internet is growing rapidly each year, the number of global users reached 801.4 million in September of 2004 (Global Reach, 2004.). The impact of misuse of internet should be address.

# Objectives



- (1) to understand the situation of internet overuse related problems, especially in young people in the Region through case reports;
- (2) to discuss some controversial issues on the internet misuse related problems, such as the definition, the nature, the relationship with other mental disorders;
- (3) to discuss the following work in next stage:
  - to develop a diagnostic criteria for the internet overuse related mental health problem;
  - to conduct well designed epidemiological surveys in community to try understand the nature and extent of the problem, the characteristic of internet addicted users, and the relationship with some comorbidity mental disorders;
  - to draft the recommendation for schools, companies, government sector how to reduce the negative impact of internet use.

# 专家会成员



## Temporary adviser

- Dr. David N Greenfield
- Dr. Kimberly S. Young
- Dr. Howard J. Shaffer

## Participants

- |                     |    |
|---------------------|----|
| • Australia         | 2  |
| • China             | 2  |
| • Japan             | 1  |
| • Republic of Korea | 1  |
| • New Zealand       | 1  |
| • Singapore         | 1  |
| • Other             | 2  |
| • TOTAL             | 11 |



**此工作小组与专家会议无疾而终，  
原因是太超前**



# 修订ICD-11契机来了



# 行为成瘾是否将成为一个新的疾病单元

郝伟

从精神病学的角度看,依赖与成瘾常常为同义词,往往指对某些化学物质,如酒精、阿片类物质冲动性使用以及强烈的渴求。但不同学科,甚至精神病学学科本身对成瘾与依赖的内涵有着不同的认识与解释;另外,与药物依赖相似临床特征与机制的行为异常(如病理性赌博、网络成瘾等)也逐渐被人们所认识,这些所谓行为成瘾性质特点如何,能否成为疾病单元,进入精神障碍的分类系统争议甚多。本文对成瘾(addiction)及行为成瘾(behavioural addiction)二者的概念、研究进展进行回顾,以及对

性指明增加物质的使用量才能达到中毒量或预期效果,或相同的物质使用量则达不到预期的效果;戒断状态为当物质使用减少或终止时出现的特殊症状群。

从这个角度看,如果把以上作为成瘾的核心要素,那么将某些行为障碍(如病理性赌博、购物狂、网络成瘾等)考虑为成瘾性障碍似乎理所应当。

## 二、行为成瘾的概念及分类

直到目前为止,过度的犒赏寻求行为在诊断和治疗上仍没有达成共识,其分类也未能确定。所谓

**World Health  
Organization**

## The Concept and Position of Behavioural Addiction in the Classification of Mental Disorders

Wei Hao, Mira Fauth-Bühler, Karl Mann

Traditionally, the term addiction has been associated with dependence on psychoactive substances, such as alcohol and other drugs. More recently, addiction has been applied to a range of problematic behaviours such as gambling, internet use and sex to mention only a few. Whether or not behavioural addictions should be treated as "real" addictions is currently under debate. In the two main diagnostic systems of mental disorders, the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) (APA, 1996) and the International Classification of Diseases, Tenth Edition (ICD-10) (WHO, 1992) only pathological gambling is included but is classified as an impulse control disorder. In the Fifth Edition of the DSM behavioural addiction has been suggested as a new class but disordered gambling will be the sole behavioural addiction in this group. Internet addiction will only be included in the appendix (Holden, 2010). The aim of this report is to provide a basis that allows making an informed decision of whether or not behavioural addictions should be merged with substance use disorders (SUDs) and if so, what kind of behavioural addictions should be included in forthcoming ICD-11.

## I. The concept of addiction

The term addiction is derived from the Latin verb *addicere*, which referred to a Roman court action of binding a person to another. The term was later used to describe attachment or devotion to an activity. Addiction thereof was used in the 17<sup>th</sup> and 18<sup>th</sup> centuries to refer to use of psychoactive substances (Maddux & Desmond, 2000).

Traditionally, addiction has been defined as repeated use of a psychoactive substance (or substances) to the extent that the user (referred to as an addict) is periodically or chronically intoxicated, shows a compulsion to take the preferred substance (or substances), has great difficulty in voluntarily ceasing or modifying substance use, and exhibits determination to obtain psychoactive substances by almost any means. Typically, tolerance is prominent and a withdrawal syndrome frequently occurs when substance use is interrupted (WHO, 1994).

The core elements of addiction (dependence) according to the diagnostic criteria in ICD-10 are:

1. Loss of control: impaired capacity to control substance-taking behaviour in terms of its onset, termination, or levels of use; persistent desire or unsuccessful efforts to reduce or control substance use; persistent use despite clear evidence of harmful consequences

## RESEARCH REPORT

# Should addictive disorders include non-substance-related conditions?

Marc N. Potenza

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## ABSTRACT

**Aims** In anticipation of the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-V), to consider whether addictive disorders should include non-substance use disorders. **Methods** The author reviewed data and provided perspective to explore whether disorders such as pathological gambling (PG) should be grouped together with substance dependence, given that they share many features. **Results** PG and substance dependence currently reside in the DSM, fourth edition, text revision (DSM-IV-TR) within separate categories, with PG classified as an impulse control disorder (ICD) and substance dependence as a substance use disorder (SUD). Arguments can be forwarded to support each categorization, as well as to justify their inclusion together as addictions. **Conclusion** The current state of knowledge suggests that there exist substantial similarities between PG and SUDs. Further research is indicated prior to categorizing PG and other ICDs together with SUDs.

**Keywords** Behavioral addictions, categorization, classification, impulse control disorders, pathological gambling, substance dependence.



# Revision of ICD-10 Mental and Behavioural Disorders

## **ICD-11 Content Form for Behavioural Addiction (in discussion)**

Working Group on Behavioural Addiction  
Date Submitted: February 28 2012



# 物质使用相关障碍与行为成瘾



- 精神活性物质相关障碍
  - 05 Q 00 精神活性物质所致急性中毒 *Acute intoxication due to psychoactive substance use*
  - 05 Q 01 危害使用 *Harmful use*
  - 05 Q 02 依赖 *Dependence*
  - 05 Q 03 戒断综合征 *Withdrawal syndrome*
  - 05 Q 04 物质所致精神障碍 *Substance-induced disorders*
  - *21 X 00 Hazardous use (1 parent in Z codes)*
- 行为成瘾障碍
  - 05 R 00 赌博成瘾（障碍） *Gambling addiction (disorder)*
  - 05 R 01 其他行为成瘾 *behavioral addictions*

# 行为成瘾：新类别



- 诊断标准与物质滥用相似，即渴求、失控、不良后果等

建议包括：

- 赌博成瘾 Gambling addiction
  - 其他成瘾 Other behavioural addictions
    - 网络/电脑使用相关成瘾 ( ? ) *Internet/computer use related addiction ( ? )*
- Or
- 病理性使用电子媒介和产品 ( ? ) *Pathological use of electronic media and devices*

# Definition of behavioural addiction

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Behavioural addiction is characterized by an irresistible urge, impulse, drive to repeatedly engage in an action (non-substance use) and an inability to reduce or cease this behaviour (loss of control) despite serious negative consequences to the person's physical, mental, social, and/or financial well-being.

# Diagnostic guidelines on behavioural addiction



- The key aspect of behavioural addiction is a maladaptive recurrent and often irresistible urge, drive or impulse to engage in certain actions those are harmful to the person and / or others.
- The diagnostic criteria resemble those for substance dependence, i.e., preoccupation with the behaviour, diminished ability to control the behaviour, adverse psychosocial consequences. Individuals report a dysphoric mood state if they abstain from the behaviour (i.e. withdrawal). With repeated behaviour positive mood effects decrease or there is a need to increase the intensity of the behaviour to achieve the same positive effects (i.e. tolerance).

# Gambling disorder



The gambling disorder is characterized by frequent, repeated urges to gamble that cannot be controlled and which dominate the patient's life to the detriment of social, occupational, material, and family values commitments and deleterious long-term outcomes.

# Diagnostic guidelines on gambling disorder



- A. Show frequent, repeated episodes of gambling which dominates the individual's life to the detriment of social, occupational, material, and family values and commitments.
- B. Have intense urges to gamble, which are difficult to control
- C. Either put their jobs at risk, acquire large debts, lie or break the law to obtain money or evade payments of debts
- D. Have preoccupation with ideas and images of the act of gambling and the circumstances that surround the act. The preoccupations and urges often increase at times when life is stressful.
- E. Such behaviour can be observed secondary to psychiatric disorders, such as mood disorder (esp. manic episode), personality disorders.

# Diagnostic guidelines on pathological use of electronic media and devices



Individuals with Pathological use of electronic media and devices have repeated and frequent intense urges to use the electronic media and devices / internet, It is manifested by:

- A. Maladaptive preoccupation with the electronic media and devices (off- and online), as indicated by the following:
  - (1) Preoccupations with use of the electronic media and devices that are experienced as irresistible.
  - (2) Excessive use of the electronic media and devices for periods of time longer than planned (often associated with a loss of sense of time or a neglect of basic drives)
- B. The use of the electronic media and devices or the preoccupation with its use causes significant distress or impairment in social, occupational, or other important areas of functioning.
- C. The excessive electronic media and devices use does occur exclusively during periods of hypomania or mania and is accounted for by other mental disorders.
- D. Continued frequent use despite negative repercussions such as arguments, lying, poor achievement, social isolation
- E. Feelings of anger, tension, and/or depression when the electronic media and devices are inaccessible
- F. The need for better upgraded equipment, recent software, or more hours of use



# 行为成瘾在ICD-11中成为一个新类别?



## 赞成理由

行为成瘾与其他成瘾疾病的模式相似，如过度使用、戒断、耐受性、和包括职业和学业表现受损的消极社会影响。

初步证据指出，对于行为成瘾中涉及到内源性阿片类系统，可用阿片类受体阻滞剂治疗。这与已知的成瘾疾病基础的一般机制是一致的。

## 反对理由

真正的生理性戒断和耐受性在行为成瘾的对照研究中尚未得到证实。社会及职业领域的受损可能是由于基础疾病。

这一研究是基于小样本研究的。需要进行大范围的随机对照研究去证实这一结果。

# 行为成瘾在ICD-11中成为一个新类别?



## 支持理由

鼓励有行为成瘾症状的人们去寻求帮助和治疗，从而减少健康和社会心理的消极结果，以及耻辱感。

如果行为成瘾是一项正式的疾病诊断，将会刺激研究和教学工作。如果研究不支持行为成瘾成为一种独立的疾病，它将从修订后的版本移除掉。

## 反对理由

行为成瘾被归类为“疾病”，我们将把可能的一个“正常”和社会问题发展性地归为病态。

行为成瘾创造一个单独的类别，随着新科技的发展，将为各种新的“疾病”广开大门。这将进一步削弱公众对精神科诊断的信任。

# I am not a dangerous man for DSM-5



- 行为成瘾被纳入精神疾病分类系统在实践中、概念上均存在问题。这种分类会迅速扩大到所有导致麻烦的冲动行为。
- 没有明确的分界线去区分由“愉悦”驱动行为和由成瘾驱动的行为，这将无限地扩大行为成瘾的边界，使之无处不在。
- “行为成瘾”将有可能成为人们遇到麻烦时，对过去不负责任的借口。
- “上瘾”降低了对自己放纵的自我控制或责任意识。
- 医学化（medicalization）将这些自我放纵的行为成为疾病，将极大地膨胀精神障碍患病率。

# WHO Expert Meetings on Internet Related Issues



- **2014年日本东京会议：**旨在取得与互联网和其他通讯/游戏平台相关行为障碍的基础性国际共识；
- **2015年韩国首尔会议：**旨在在国际精神障碍疾病分类(ICD-11)框架下探讨与互联网和其他通讯/游戏平台过度使用相关的行为障碍的范围、分类和临床描述等问题；
- **2016年中国香港会议：**旨在交流来自于全世界不同国家的现行政策法规及政府规划；
- **2017年土耳其伊斯坦布尔会议：**旨在讨论网络游戏障碍、赌博障碍及其他相关障碍的规范化测量及干预以及全球多中心现场试验工作的相关问题。







# 主持WHO第四次专家会议



# ICD-11公布



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## Classifications

Family of International Classifications

Family of International Classifications network

Classification of Diseases (ICD)

Classification of Functioning, Disability and Health (ICF)

Classification of Health Interventions (ICHI)

## The 11th Revision of the International Classification of Diseases (ICD-11) is due by 2018!



WHO and the ICD-11-MMS Joint Task Force are reviewing each chapter, individually, making such corrections as are necessary to prepare the ICD-11 version for Mortality and Morbidity Statistics (ICD-11-MMS) for the release for country implementation in June 2018. This release allow Member States and other stakeholders the opportunity to begin preparations and implementation exercises in country and to provide feedback to WHO about national requirements and necessary support.

[Browse the current draft of ICD-11 online](#) 

[Access the ICD-11 Coding Tool](#)



**55000 codes** in ICD-11 v 14400 in ICD-10

**31 countries** were involved in ICD-11 field testing

**1673 participants** taking part in 112383 code assignments





# ICD-11将游戏障碍列入为成瘾性障碍



News

WHO Release

## ICD-11 updates resistance codes, adds gaming as addictive disorder

Posted on Jun 20 '18, in Human Rights, Policy, Res June 18, 2018

WHO Releas



ADD TOPIC TO EMAIL ALERTS

11th Revision of the International  
Disease

Geneva, June 18, 2018, WHO has release  
International Classification of Diseases (IC

The ICD is the foundation for identifying h  
contains around 55 000 unique codes for  
provides a common language that allow  
information across the globe.



The ICD is a product that WH  
Adhanom Ghebreyesus, WH

It enables us to understand so much al  
and to take action to prevent suffering

ICD-11, which has been over a decade ir  
improvements on previous versions.

3 major improvements

WHO previewed a new International Classification of Diseases, ICD-11, which includes updates to codes related to antimicrobial resistance, adds gaming as an addictive disorder and categorizes gender incongruence as a matter of sexual health, not a mental health condition.

The ICD serves as a foundation for identifying global health trends and statistics and contains approximately 55,000 unique codes for injuries, diseases and causes of death, offering a common language that enables health care providers to share health information around the world, according to WHO. It has not been revised in nearly 3 decades.

### SEE ALSO

CDC: Fewer high school students  
having sex, using...

Study IDs significant infection  
control gaps at small...

Study supports safety concerns of  
world's only...

WHO said it will present ICD-11 for adoption by member states at the World Health Assembly in May 2019. It will take effect on Jan. 1, 2022. The preview gives member states time to plan how to use the updated version, formulate translations and train health professionals on its use. ICD-10, which was endorsed in 1990, is used in more than 120 countries.

# ICD-11现场测试中国小组协调会





# ICD-11游戏障碍受到游戏公司的反对



DEBATE

*Journal of Behavioral Addictions* 6(3), pp. 267–270 (2017)  
DOI: 10.1556/2006.5.2016.08

## Scholars' open debate paper on the World Health Organization ICD-11 Gaming Disorder proposal

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Concerns about problematic gaming behaviors deserve our full attention. However, we claim that it is far from clear that these problems can or should be attributed to a new disorder. The empirical basis for a Gaming Disorder proposal, such as in the new ICD-11, suffers from fundamental issues. Our main concerns are the low quality of the research base, the fact that the current operationalization leans too heavily on substance use and gambling criteria, and the lack of consensus on symptomatology and assessment of problematic gaming. The act of formalizing this disorder, even as a proposal, has negative medical, scientific, public-health, societal, and human rights fallout that should be considered. Of particular concern are moral panics around the harm of video gaming. They might result in premature application of diagnosis in the medical community and the treatment of abundant false-positive cases, especially for children and adolescents. Second, research will be locked into a confirmatory approach, rather than an exploration of the boundaries of normal versus pathological. Third, the healthy majority of gamers will be affected negatively. We expect that the premature inclusion of Gaming Disorder as a diagnosis in ICD-11 will cause significant stigma to the millions of children who play video games as a part of a normal, healthy life. At this point, suggesting formal



entertainment  
software  
association

ENTERTAINMENT  
SOFTWARE  
ASSOCIATION OF CANADA

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LOGICIEL DE  
DIVERTISSEMENT



European  
Games Developer  
Federation



iesa  
INTERACTIVE ENTERTAINMENT SOUTH AFRICA

IGEA  
interactive games & entertainment association



KGAMES  
한국게임산업협회  
Korea Association  
of Game Industry

UBV&G  
UNIAO BRASILEIRA DE VIDEO E GAMES

Date: 15/06/2018

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## STATEMENT ON WHO ICD-11 LIST AND THE INCLUSION OF GAMING

In view of the publication by the WHO of the so-called ICD-11 list, organisations representing video game publishers and developers across the world would like to express their concern:

"Video games across all kinds of genres, devices and platforms are enjoyed safely and sensibly by more than 2 billion people worldwide, with the educational, therapeutic, and recreational value of games being well-founded and widely recognised. **We are therefore concerned to see 'gaming disorder' still contained in the latest version of the WHO's ICD-11 despite significant opposition from the medical and scientific community. The evidence for its inclusion remains highly contested and inconclusive. We hope that the WHO will reconsider the mounting evidence put before them before proposing inclusion of 'gaming disorder' in the final version of ICD-11 to be endorsed next year.** We understand that our industry and supporters around the world will continue raising their voices in opposition to this move and urge the WHO to avoid taking steps that would have unjustified implications for national health systems across the world."

## Background information on the WHO ICD-11 list:

### 1. What is the ICD-11 list?

The World Health Organisation (WHO) is currently reviewing its list on classification of diseases (ICD) that is widely used as a manual by practitioners and importantly is implemented by many countries in their national health policies.

The current draft proposes to add "gaming" under the section that deals with 'Disorders due to addictive behaviours' (category 06) which also deals with alcohol, drugs, gambling. The ICD-11 beta draft can be consulted here: <http://bit.ly/2laaspl>

# 主要反对理由



- 全世界有25亿人玩游戏，人们享受游戏带来的娱乐
- 游戏具有教育和治疗的作用
- 游戏障碍的证据 “高度争议和不确定”
- 游戏障碍会造成 “道德恐慌” 和 “滥用诊断”

# 我们的反击



COMMENTARY

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COMMENTARY

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## Gaming disorder: Its delineation as an important condition for diagnosis, management, and prevention

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Online gaming has greatly increased in popularity in recent years, and with this has come a multiplicity of problems due to excessive involvement in gaming. Gaming disorder, both online and offline, has been defined for the first time in the draft of 11th revision of the *International Classification of Diseases* (ICD-11). National surveys have shown prevalence rates of gaming disorder/addiction of 10%–15% among young people in several Asian countries and of 1%–10% in their counterparts in some Western countries. Several diseases related to excessive gaming are now recognized, and clinics are being established to respond to individual, family, and community concerns, but many cases remain hidden. Gaming disorder shares many features with addictions due to psychoactive substances and with gambling disorder, and functional neuroimaging shows that similar areas of the brain are activated. Governments and health agencies worldwide are seeking for the effects of online gaming to be addressed, and for preventive approaches to be developed. Central to this effort is a need to delineate the nature of the problem, which is the purpose of the definitions in the draft of ICD-11.

## Functional impairment matters in the screening and diagnosis of gaming disorder

*Commentary on: Scholars' open debate paper on the World Health Organization ICD-11 Gaming Disorder proposal (Aarseth et al.)*

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This commentary responds to Aarseth et al.'s (in press) criticisms that the ICD-11 Gaming Disorder proposal would result in "moral panics around the harm of video gaming" and "the treatment of abundant false-positive cases." The ICD-11 Gaming Disorder avoids potential "overpathologizing" with its explicit reference to functional impairment caused by gaming and therefore improves upon a number of flawed previous approaches to identifying cases with suspected gaming-related harms. We contend that moral panics are more likely to occur and be exacerbated by misinformation and lack of understanding, rather than proceed from having a clear diagnostic system.

**Keywords:** Internet gaming disorder, ICD-11, IGD, gaming disorder, diagnosis, functional impairment

## INTRODUCTION

such a classification would be premature. This commentary has been authored by a group of scholars who have partici-

# 主要反击内容



- 过度渲染游戏障碍带来的娱乐功能，而忽略过渡游戏带来的公共卫生与精神卫生问题；
- 错误地把游戏的教育功能等同于教育软件，很多研究发现，游戏软件的教育功能益处可以忽略不计；
- 选择寻找支持游戏公司的研究者与研究证据，选择性忽略对其不利的研究证据。



# 主要反击内容



- 游戏公司应该注意到相关的流行病调查、神经生物学研究及临床证据；
- 游戏公司不能利用学术争论给公众造成自己无辜的印象；
- 游戏尽管给人们带来一定的娱乐，但还是给易感人群，特别是青少年带来危害，这一点必须承认；
- 游戏公司应该对游戏相关问题承担责任，应该与政府、公共卫生工作者合作，减少相关危害。

## ·学术讨论·

# 游戏障碍的研究进展及作为 ICD-11 精神与行为障碍 (草案)新诊断分类的争议

钟娜 杜江 Vladimir Poznyak 赵敏 郝伟

近年来游戏障碍群体逐渐增加,表现为对游戏强烈渴求、不顾负性后果的失控性使用。游戏障碍与物质成瘾在行为特征、发病机制及危险因素上存在类似之处。2017 年 4 月发布的 ICD-11 精神与行为障碍(草案)(以下简称 ICD-11)新增游戏障碍(gaming disorder)的诊断分类,并纳入物质使用或成瘾行为所致障碍章节。但部分学者担心游戏障碍作为新的诊断类别,可能会造成过度诊断及治疗,或者造成对游戏玩家的明显歧视。我们将从游戏障碍相关进展出发,阐述游戏障碍作为新的诊断分类的必要性及合理性,并对目前游戏障碍诊断存在的争议进行评述。

## 一、游戏障碍目前为世界范围内的普遍性问题

全球范围内游戏玩家增长迅速,游戏障碍流行率也逐渐增高。1 篇纳入全球 50 项研究的系统综述提示游戏障碍的流行率 0.7%~27.5%,男性多于女性,青少年多见<sup>[1]</sup>。世界范围内游戏障碍的流行率呈现地区特异性,亚洲流行率报告较高,而欧美国家流行率报告相对较低。如韩国网络游戏成瘾流行率约为 5.9%<sup>[2]</sup>,而美国约为 0.3%~1.0%<sup>[3]</sup>,德国为

游戏障碍在国内外是一个普遍性问题,既往对游戏障碍的流行率调查结果差异较大,主要原因是既往游戏相关问题标准化评估工具及诊疗指南缺乏,研究常常采用不同评估工具及方法,统一的诊断分类标准有助于规范诊疗及提高研究质量。2013 年出版的 DSM-5 将网络游戏障碍作为待研究的诊断分类,使游戏障碍相关研究方法学质量及证据可靠性得到改善。

## 二、游戏障碍的危害及相关临床实践

1. 游戏障碍带来广泛的健康或社会功能损害:游戏障碍者伴随着明显的健康及社会职能损伤,包括躯体健康损伤(如昼夜节律紊乱、脱水、营养不良等),精神行为改变(应激状态、易激惹、焦虑抑郁、内疚、无助、罪恶、失控性行为等),社会职能受损(如重要关系丧失、学校职能受损、职业职能受损等)<sup>[12-14]</sup>。游戏障碍者表现出执行控制功能、风险决策能力下降,并且这些行为改变与其奖赏相关脑区(如岛叶等)及决策控制有关脑区(如前额叶、前扣带回等)激活改变有关<sup>[15-18]</sup>。



# 行为成瘾的内涵

# 物质相关及成瘾障碍 (ICD-11)



## 物质使用所致障碍 (Disorders due to substance use)

- 酒精
- 大麻
- 阿片类
- 镇静剂, 催眠药或抗焦虑药
- 可卡因
- 兴奋剂(包括苯丙胺、甲基苯丙胺和甲卡西酮)
- 咖啡因
- 致幻剂
- 尼古丁
- 吸入剂
- 摇头丸
- 分离性药物中毒(包括氯胺酮和苯环己哌啶)
- 其他精神活性物质

## 成瘾性行为所致障碍 (Disorders due to addictive behaviours)

- 赌博障碍
  - 线上
  - 线下
- 游戏障碍
  - 线上
  - 线下
- 其他特定的成瘾行为障碍

# 成瘾性行为所致精神障碍



- 成瘾性行为所致精神障碍是能够被识别的，具有明显临床意义的综合征，特征是反复非物质使用相关的犒赏行为，导致痛苦或者人际关系问题。
- 包括线上与线下的赌博障碍与游戏障碍

# 赌博障碍 (Gambling Disorder)



- 持续或者反复的赌博行为
- 特征
  - 对赌博的控制受到损害
  - 将赌博置于其他活动之上，使赌博优先于其他兴趣和日常活动，
  - 尽管发生了负面的后果，仍继续赌博。
- 这种行为模式的严重程度足以导致个人、家庭、社会、教育、职业或其他重要功能领域的严重损害。
- 通常持续至少12个月的时间，如果症状严重，所需的持续时间可以缩短。



# 游戏障碍 (Gaming disorder)



- 持续或反复的游戏行为(即“数字游戏”或“电子游戏”),
- 特点:
  - 对游戏的控制受到损害,
  - 将玩游戏置于其他活动之上, 使玩游戏优先于其他兴趣和日常活动
  - 尽管发生了负面的后果, 仍继续玩游戏
  - 这种行为模式的严重程度足以导致个人、家庭、社会、教育、职业或其他重要功能领域的重大损害。
- 通常持续至少12个月的时间, 如果症状严重, 所需的持续时间可以缩短。



# 行为成瘾的外延

# 人类与生物体共同的追求行为



## 本能行为相关的驱动力（心理）

- 自我保存：DNA自我复制
- 种族保存：DNA向下传递

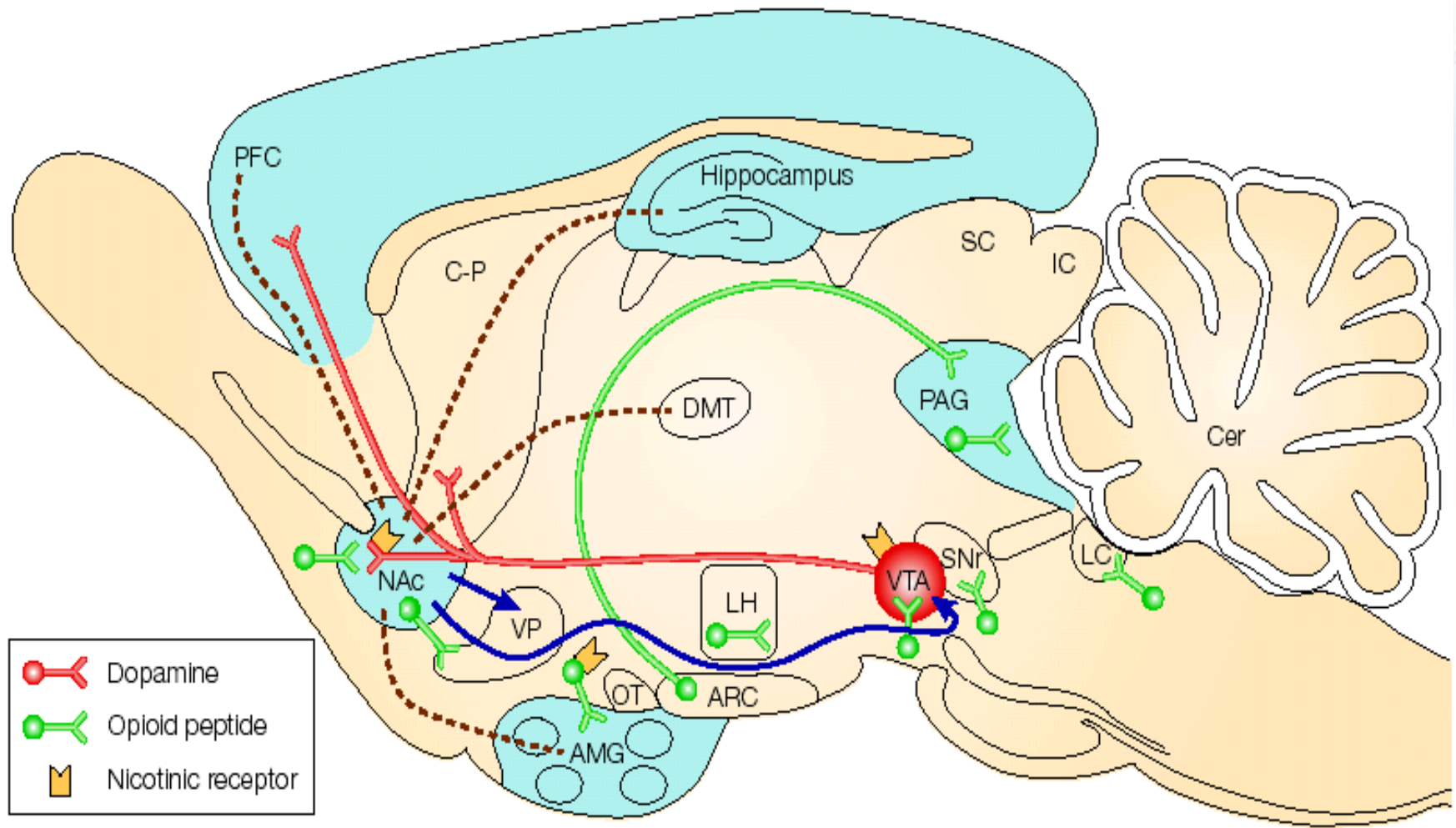
## 本能行为（生物）

- 犒赏与快感
- 趋利避害

- 快活多一些
- 痛苦少一些
- 能力强一些

## 本能行为衍生的追求（社会）

所有能满足人类这类追求的物质或者行为都具成瘾性



# 犒赏的神经环路 (Nestler, RJ. Nature Review, 2001)

# 物质和行为成瘾之间的共同点



- 临床表现
- 病因、病理生理
- 与其他精神障碍的共病
- 社会功能损害
- 遗传易感性
- 治疗反应

(Petry, 2010).



# 行为成瘾和物质成瘾的共性



	物质使用障碍	行为成瘾
行为导致快感或者缓解痛苦	+	+
强烈的渴望 (渴求) 采取行动	+	+
行动失控	+	+
不顾不良后果	+	+
忽视正常快乐或兴趣	+	+
行动失控	+	+
戒断	+/-	+/-
耐受	+/-	+/-

# 行为成瘾相关精神障碍



# 行为成瘾共病



- 抑郁症
- 焦虑症
- 双相障碍
- 强迫症
- 人格障碍
- 精神分裂症
- 其他物质使用障碍

# 小结与今后的工作



- 任何具有增加正性情绪与缓解情绪的物质或者行为都具有成瘾性；
- 成瘾行为包括物质成瘾与行为成瘾；
- 将游戏障碍纳入诊断系统有助于减少由于游戏相关问题导致的公共卫生、精神卫生危害；
- 加强相关研究：
  - 流行病学调查
  - 游戏障碍的转归
  - 筛选与评估
  - 治疗
  - 共病研究
  - 脑影像研究
  - 预防研究
  - 立法研究

*Thank you*

