Internet Gaming Disorder (IGD): A Case Report of Social Anxiety

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Abstract

BACKGROUND: Internet gaming disorder (IGD) has been included in the 5th edition of The Diagnostic and Statistical Manual of Mental Disorders (DSM-5). At present, many cases are encountered because of the disruption of this internet game, including in various age groups. Internet gaming addiction is a common disorder and often accompanies depression, hostility and social anxiety.

CASE REPORT: We found a case of anxiety disorder in people who play games on the network with the chief complaint that they cannot sleep. A 28-year-old man, a Javanese tribe with a job as a builder who came with his wife to the (Universitas Sumatera Utara) USU hospital psychiatric clinic. Experienced by the patient in about one year.

CONCLUSION: From the above case, we report that internet gaming disorder occurs in all age groups and social statuses.

Introduction

Internet gaming disorder has been recognised by the American Psychiatric Association (APA) as a temporary disorder in the latest fifth revision of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). To advance research on Internet Gaming Disorder, APA has suggested further research from various case study reports on the Internet Gaming Disorder criteria to investigate the clinical and empirical feasibility needed. Online video games are now widely considered to be activities that may be associated with addictive behaviour, so the diagnosis of Internet Gaming Disorder is now included in the DSM-5 and ICD 11; but there is still debate about some specific features of the disorder, one aspect of which is debated is the time spent playing games. Internet gaming disorders are defined by continuous and repeated involvement with video games, often leading to significant daily, work and / or educational disruptions and has been suggested by America Psychiatric Association (APA) as a tentative psychiatric disorder that requires further study (Diagnostic and Statistical Manual of Mental Disorders (DSM-5)) [1], [2], [3], [4], [5].

According to the DSM-5, Internet Gaming Disorder is indicated by the support of at least five core symptoms (from nine) in over one 12-month period. More specifically, the diagnostic criteria of Internet Gaming Disorder, including the following nine clinical symptoms: (1) preoccupation with videogames (i.e. "preoccupation"); (2) experiencing unpleasant symptoms when playing videogames (i.e. "withdrawal"); (3) the need to spend an increased amount of time involved in video games (i.e. "tolerance"); (4) failed attempts to control participation in videogames (i.e. "lose control"); (5) losing interest in past hobbies and entertainment as a result of, and with the exception of, videogames (i.e., "surrender from other activities"); (6) continue to use videogames despite having knowledge of psychosocial problems...
(i.e. "continuation"); (7) deceiving family members, therapists or others regarding the number of videogames (i.e. "fraud") (8) using videogames to escape or eliminate negative feelings (i.e., "escape") and (9) harm or lose relationships, work, or education or significant career opportunities because of participation with videogames (i.e. "negative consequences") [2]. People with this condition endanger their academic or work functions because of the amount of time they spend [3]. They will experience one of the most frequent symptoms is withdrawal, worry, and anxiety that cannot be controlled and is associated with somatic symptoms, such as muscle tension, irritability, difficulty sleeping, and anxiety. It lasts for at least six months. The essential picture of this disorder is the existence of general and persistent anxiety, but not limited to or only prominent in any particular environmental condition. (free-floating anxiety). Research shows that when people are engrossed in play on the network, specific pathways in their brain are triggered in the same direct and intense way as the brain of narcotics addicts (amphetamines) that are affected by certain substances. This game encourages neurological responses that affect feelings of pleasure and in extreme circumstances manifest as addictive behaviour [3], [4], [5], [6], [7], [8], [9], [10].

Case Report

A man, A, 28 years old, a Javanese tribe was married and had two children, a five-year-old daughter and a one-year-old son. Mr A has problems in his daily life in social interaction. Alloamnese that comes from Mr A's wife, Mr A who often plays internet games, tends to spend his time just playing internet games. It also disrupts daily activities such as eating, bathing and providing a living for the family; he often only thinks about how to access the internet game. Mr A has trouble sleeping at night and barely sleeps in the past few weeks. Mr A feels worthless and has a sense of guilt in the family, difficult concentrating and making choices that almost every day he experiences. Mr A said he almost every day plays online games, more than 10 hours a day, for one year. As for games played such as DOTA-2, GTA-San Andreas, etc. Mr A has tried to stop his routine activities but failed. Until finally, Mr A's wife tried to bring Mr A for treatment. The history of the use of alcohol or additives is refuted. Mr A also never suffered from head trauma. Mr A never thought about suicide.

In the psychiatric history of the interview results, it was found that Mr A could not sleep for at least one year, and was burdensome in the past six months. This started with Mr A for almost two years playing in internet games. As long as when Mr A is offline, Mr A feels feelings of fear, anxiety, anxiety, confusion, boredom, anxiety, panic, and sadness. There was distractibility, dysphoric mood, appropriate affect, and another emotion is anxiety. Speech flow and speech pressure are normal; there is no poverty of speech or logorrhea. Likewise, there is no flight of ideas, tangentiality, circumstantiality, and lose associations. Illusions and hallucinations are not found. Delusions cannot be confirmed, but there are preoccupations and obsession thoughts to be able to continue accessing the online game. Mild failure is encountered. Short-term memory is interrupted, but immediate, medium and long memories are excellent. The ability to read, write and visuospatial is good. Able to think concretely and abstractly. There is no retro or anterograde amnesia nor paramecia. The dream is nothing special; Fantasy from patients wants to be famous and recognised by many people. V degree of view with Judgment Automatic consideration.

The patient was introduced to Online Games by a close friend in middle school until finally, he became addicted and could not escape. On general physical examination, a general condition is found within normal limits. Sensory and vital signs in the form of blood pressure, pulse, temperature, and breathing rate are within normal limits. There is no enlargement of the thyroid gland in touch. Vesicular breath sounds, no additional sounds. Regular heart sounds of 90 x/I, no murmurs, gallops and other additional sounds. There was normal peristaltic; organomegaly was not found. Sunken eyes, but there are no signs of anemics or jaundice. Extremity function well, there is no paresis or paralysis: brownish skin, turgor, and good skin elasticity. No further checks are carried out on the patient, only Blood Glucose ad Random 126 mg/dl. We make a diagnosis of Internet Gaming Disorder, GAF Scale 50-41.

Discussion

In establishing a diagnosis for a disorder in the above case, the criteria are the scale of Internet Gaming Disorder Scale 9-Short Form (IGDS9-SF) based on DSM-5. Where continuous and repetitive use of internet games to engage in games, often with other players, causes clinically significant decreases or pressures as indicated by 6 of the nine criteria below for over 12 months [1].

In this case, after a complete psychiatric history is carried out, psychological tests and mental status checks and refer to the diagnostic criteria, it is known that the patient above meets the diagnostic criteria as addictive behaviour.

If it is classified again based on DSM-5 and ICD-11, the above patients can be diagnosed as a
comprehensive anxiety disorder due to internet games disorders. If it is classified again based on DSM-5 and ICD-11, the above patients can be diagnosed as a comprehensive anxiety disorder because of internet games disorders. So far, the case reports have only seen the influence of internet game disorder with one's social relationships with social life. In the top case report, after a complete history, clinical interview, mental status examination, and using the internet-scale of the 9-Short Form Disorder Scale 9 found anxious disturbances in people playing in network games complaining of being unable to sleep. Where in previous case studies only reported relationships with social life. Internet game disorder is a new diagnosis that requires studies and cases that can make internet game disorder a clinical disorder [1], [4].

Overall, in this case, the Internet Gaming Disorder included in the specified DSM-5 already existed some time ago. With the most dominant male. Nine of the proposed symptoms have two underlying factors, heavy involvement in playing games that prove to be quite common and harmful game consequences are rather rare. Two of the common symptoms of severe involvement, tolerance and efforts that fail to control the game, are not too specific for Internet Gaming Disorder. Symptoms of withdrawal are linked weakly to Internet Gaming Disorder, both as a diagnosis and as a continuous construction. It is essential to investigate further symptoms of Internet Gaming Disorder that have simple correlations with other symptoms of mental disorders. Despite the diverse potential of family children and consideration of demographic predictions, only low social competence and regulation of poor emotional skills predict more symptoms of Internet Gaming Disorder.

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