

The WAGER, Vol 4(40) - The March of Research

October 5, 1999

Clinicians treating pathological gambling have a limited scope of therapeutic options from which to choose. Among the more popular are cognitive-behavior therapy, psychopharmacology, conventional psychotherapy, and groups based on the 12-step model. With the exception of pharmacological options, many of which are still in development, most of these treatments have been available for years. Indeed, the rate at which new treatments are developed for pathological gambling seems slow when compared with those for other disorders such as schizophrenia and depression. Such a paucity of clinical options might seem paradoxical given the vast amount of research literature produced by scholars and researchers during the past several decades. As gambling studies progresses as a topic of academic inquiry, it is important to look back and take stock of where we are and where we are going as a field.

To quantify research patterns in gambling studies, we engaged two of the literature databases most relevant to the field: Medline and PsychInfo. Both provide searchable interfaces through which over 100 years of academic journal articles can be found. Medline contains over 9.2 million records, to which 30,000 are added each month from over 3,800 medical journals from around the world. PsychInfo contains more than 1.5 million references to articles in over 1,400 psychology journals dating back to 1872. While access to PsychInfo is restricted to paying subscribers, Medline can be accessed for free through the National Library of Medicine's Grateful Med Website. The charts below and their accompanying explanations were abstracted from multiple searches of these databases.

Figure 1: Total References to Gambling-Related Articles, by Year

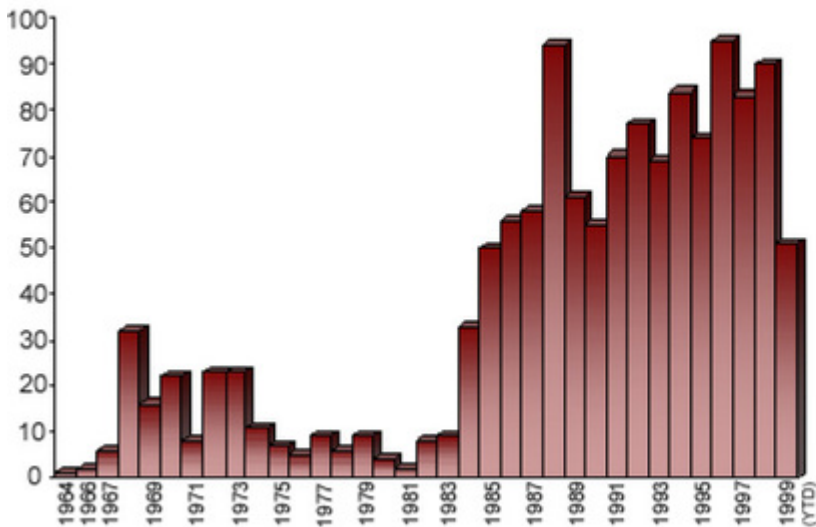
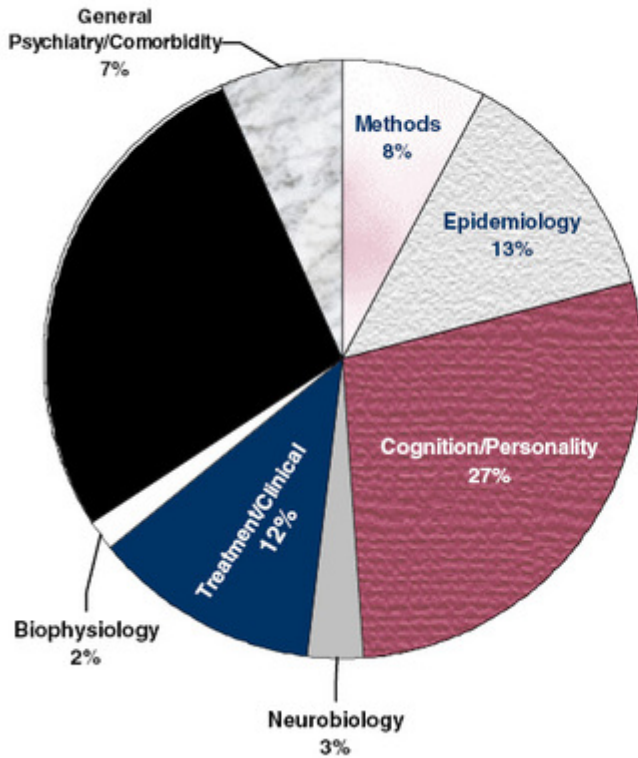


Figure 1 presents the total number of references to gambling in both databases, stratified by year. A total of 1,319 valid references were included in the present analysis after 1,686 were screened according to these criteria: Articles written in languages other than English were excluded, and the data set was "cleaned" to eliminate duplicate references. In addition, references that had no relation to gambling studies were deleted. Although there is a great deal of variation in the distribution, the data indicates a general increase in the number of gambling-related journal articles published each year.

Figure 2: Gambling Literature Stratified by Content Type



Articles were classified according to their content and the methodology employed. The miscellaneous category includes references to literature reviews, editorials, and other types of publications that are difficult to categorize. The data reveals that the plurality of classifiable articles deal with the cognitive and personological aspects of gambling. Most of these studies fall into the realm of classical psychology. Only 12% of references relate to treatment and clinical matters.

Figure 3 presents the combined number of references returned by both databases when various combinations of treatment-related keywords were entered. For this analysis, the data was not screened for duplicate references. The 1,686 references to "gambling" decrease rapidly as the search is modified to return only articles that report original, empirical clinical research. This number is reduced even further when search parameters are set to find only articles that report empirical results of clinical trials or evaluations of treatments. For this analysis, the clinical trials category includes case studies

Figure 3: References to Empirical Studies, Clinical Trials, and Treatment Evaluations (1872-1999)

	Total References ¹	References to Empirical Studies ¹	References to Clinical Trials / Treatment Evaluations ¹
Gambling	1686		
Gambling + Clinical	33	16	4
Gambling + Treatment	29	14	7
Gambler + Treatment	17	5	1
Gambler + Clinical	17	11	2

¹ Includes articles written in languages other than English. Data is unsorted for duplicate references.

That there is little published research involving treatments and therapies should not be interpreted as a reason to give up hope. A well-designed clinical trial of a new drug can take years to complete and even longer to get approved for use. Non-pharmacologic therapies require lengthy evaluations as well. A close look at figure 1 (above) reveals a marked increase in the number of gambling-related articles that begins in the late 1980s. Given the lag between the creation of a treatment and its approval and acceptance, treatments first conceived during this period might only now be ready for general use. If this trend continues, the coming years may see the clinical research efforts of the past decade finally come to fruition. However, not all new therapies are based on rigorous scientific research. Perhaps in the coming years the gap that separates research from clinical practice will be narrowed. Such is the state of gambling studies as the millenium draws to a close.

The WAGER is funded, in part, by the National Center for Responsible Gaming, the Massachusetts Department of Public Health, the Andrews Foundation, the Addiction Technology Transfer Center of New England, the Substance Abuse and Mental Health Administration Services, and the Center for Substance Abuse Treatment.