

# WAGER Vol. 14 (10): Generation Gap: Difference in PG symptoms based on age of onset.

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Research suggests that, like OCD, the clinical characteristics and symptoms of pathological gambling (PG) (e.g., symptom severity, changes in relationships, financial trouble, comorbid disorders) can vary based on age of onset. Research has indicated differences in PG-related clinical characteristics and symptoms based on gender (Ibanez, Blanco, Moreryra, & Saiz-Ruiz, 2003; Potenza, Steinberg, Wu, Rounsaville, & O'Malley S, 2006) and age when seeking treatment (Grant et al., 2007; Lucke & Wallace, 2006; Pietrzak & Petry, 2006). To further examine the clinical characteristics of PG, Grant and colleagues (Grant, Kim, Odlaug, Buchanan, & Potenza, 2009) studied a cohort of 322 adult pathological gamblers (PGs) and focused particularly on the clinical characteristics and symptoms evidenced among participants who developed PG as older adults.

## Methods

- Grant et al. (2009) recruited 322 adult participants that met current (past year) DSM-IV criteria for PG.
  - Participants were recruited during a 5 year period using advertisements, and referrals from a cognitive-behavioral study, a pharmacological study, and outpatient treatment at a private or public hospital.
- Researchers examined PG and PG-related clinical characteristics with the following instruments:
  - [Structured Clinical Interview](#) for DSM-IV Axis I Disorders and PG;
  - A semi-structured questionnaire to collect information about demographic and clinical features of PG and participant treatment history;
  - The [Yale Brown Obsessive Compulsive Scale Modified for PG \(PG-YBOCS\)](#);
  - The [South Oaks Gambling Screen \(SOGS\)](#);

- The [Clinical Global Impression-Severity scale \(CGI\)](#).
- Researchers grouped the participants by age of onset, defined as “the age when participants’ PG symptoms first met DSM-IV criteria” (Grant et al., 2009). The investigators placed them into the following three groups:
  - Younger than 26 years old (N=63);
  - Between 26 and 54 years old (N=217);
  - 55 years old and older (i.e., late onset; N=42).
- To test for differences among the three age groups, Grant et al. used Pearson’s chi-square, Kruskal-Wallis and post hoc Bonferroni analyses.

## Results

- Compared to their younger counterparts, late onset PGs had the following significant characteristics (presented in Table 1 below with p values):
  - Endorsed fewer PG-related criteria (i.e., lower SOGS scores);
  - Less participation in gambling-related strategic games;
  - Less participation in Gamblers Anonymous;
  - More likely to seek treatment soon after experiencing PG symptoms;
  - More likely to suffer from an anxiety disorder;
  - Less likely to have a father with a history of a gambling problem.

**Table 1. Significant differences in clinical characteristics of pathological gamblers of different ages.**

**Adapted from Table 2: Clinical characteristics of pathological gamblers (n=322) based on age of pathological gambling onset (Grant et al., 2009).**

<b>Characteristics</b>	<b>25 and younger (n=63)</b>	<b>26-54 (n=217)</b>	<b>55 and older (n=42)</b>	<b>p-Value</b>
SOGS Scores, mean ( $\pm$ SD)	13.6 $\pm$ 5.04	13.8 $\pm$ 3.34	10.0 $\pm$ 2.76	.004 <sup>a, b</sup>
Strategic game playing, n (%)	42 (66.7)	102 (47.0)	9 (21.4)	<.001 <sup>a</sup>
Gamblers Anonymous, n (%)	30 (47.6)	88 (40.6)	7 (16.7)	.004 <sup>a</sup>

Seeking professional treatment, mean (± SD)	17.6 ± 11.6	8.4 ± 5.7	3.9 ± 3.7	.001 <sup>a, b</sup>
Anxiety Disorder, n (%)	7 (11.1)	32 (14.7)	16 (38.1)	<.001 <sup>a</sup>
Father with a gambling problem, n (%)	18 (29.0)	51 (23.7)	3 (7.1)	.025 <sup>a</sup>

<sup>a</sup> Bonferroni post hoc pairwise comparison (26-54 yrs) vs. (55 yrs and older)  $p < .05$ .

<sup>b</sup> Bonferroni post hoc pairwise comparison (26 and younger) vs. (55 yrs and older)  $p < .05$ .

## Limitations

- The sample lacked cultural and ethnic diversity (i.e., 94.4% were Caucasian).
- Participant history, including age of PG onset, was based on self-recall.
- Vague age of onset definition; it is unclear if participants were grouped based on the life time appearance of the first DSM criterion or the first criterion experienced in a 12-month period in which 5 or more DSM criteria were experienced.
- Using 55 years as a cut-off point is not evidence based; the authors explain that 55 years represents a reasonable extreme (13%) of the total sample and that other studies used this age as a cut off about older gamblers.

## Conclusion

The study sample is limited in its diversity, which suggests a need for further research into PG-related clinical characteristics among more diverse samples of PGs, including those who experience late-onset PG. It also could be worthwhile for researchers to examine the triggers of late onset of any gambling. The study results indicate that those with late onset PG are more likely to have certain clinical characteristics, but the authors fail to explain why the two other study groups (26 and younger and 26-54) have higher rates of treatment seeking.

Answering this question could explain a number of the current study results: likelihood of treatment in each group and the kinds of symptoms that each group experienced. Given the difference in the number of people per age group it's possible that the majority of the participants (aged 54 and younger) were simply treatment seekers whose responses skewed results.

-Ingrid Maurice

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## **References**

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