The Association of Alexithymia and Internet Gaming Disorder in a Clinical German Sample

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Theoretical Background

Presumably in 2022 (Internet) Gaming Disorder (IGD) will be added to the 11th revision of the International Classification of Diseases (ICD-11) as the first specific form of Internet Addiction (IA) and encoded as a disorder due to addictive behavior.

However, there is still a need for research on the clinical psychological profile of IGD patients, especially to identify specific risk factors (Müller et al. 2014, Torres-Rodríguez et al. 2018). In Germany, about 1.16% of adolescents aged between 13-18 years suffer from IGD (Rehbein et al. 2015). Several studies indicate that alexithymia is associated with IA in general and might be a predictor for the severity of IA (Mahapatra et al. 2018). To the best of our knowledge, no surveys are analyzing the relationship between IGD and alexithymia in a clinical sample with patients suffering from IGD and in comparison to healthy controls.

Research Questions

Since alexithymia is thought to be associated with IA we hypothesized that it would also be associated with IGD.

I. Patients suffering from IGD show higher scores of alexithymia compared to healthy controls.

Secondly, we suggested that within in the clinical group

II. alexithymia can predict IGD severity.

The constructs of alexithymia and depression are closely related and IGD is highly associated with depression (Parker et al. 1991, González-Bueso et al. 2018). We therefor suggested that

i. the prediction effect will be partially mediated by depression.

Methods

A total of n=40 IGD inpatients and outpatients (95% male, M_{age}=25.80, SD=5.85) have been recruited within a cross-sectional collaborative study over a time period of 15 months (February 2018 – June 2019) forming the Experimental Group (EG). Half of the patients (n=20) have been abstinent from playing videogames. The Control Group (CG) consisted of n=43 healthy control participants (97.7% male, M_{age}=29.00, SD=5.93), who conducted an online survey.

Each group fulfilled psychometric questionnaires measuring alexithymia (TAS-20, Taylor et al. 2003), IGD severity (adapted version of the sIAT, Pawlikowski et a. 2013) and depression (BDI, Beck et al. 1988) as well as socio-demographic factors.

Results

Chi-Square tests show an association between belonging to the EG and lower education levels ($\chi^2(4)=17.88$, p<.001, $\phi=.47$) as well as not being in a relationship $(\chi^2(1)=16.78, p<.001, \phi=.48)$. (I) Figure 1 illustrates results from multivariat data analysis indicating higher rates of alexithymia in the EG compared to the CG on all subscales of the TAS-20. (II) Figure 2 illustrates results from mediation analysis (PROCESS Procedure for SPSS, Version 3.2, http://www.afhayes.com) showing neither a prediction effect of alexithymia on IGD severity, (i) nor a mediating effect of depression.

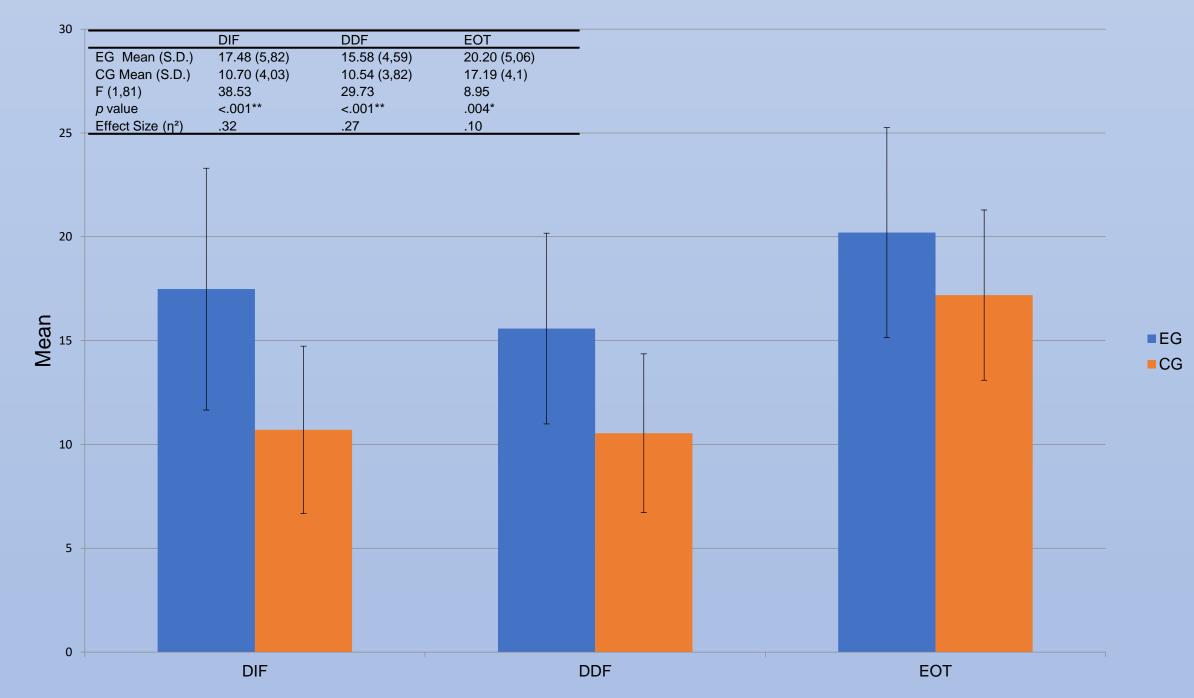


Figure 1 Differences between the groups in Alexithymia on all TAS-20 subscales (DIF=Difficulties Identifying Feelings, DDF=Difficulties Describing Feelings, EOT=External-Oriented Thinking)

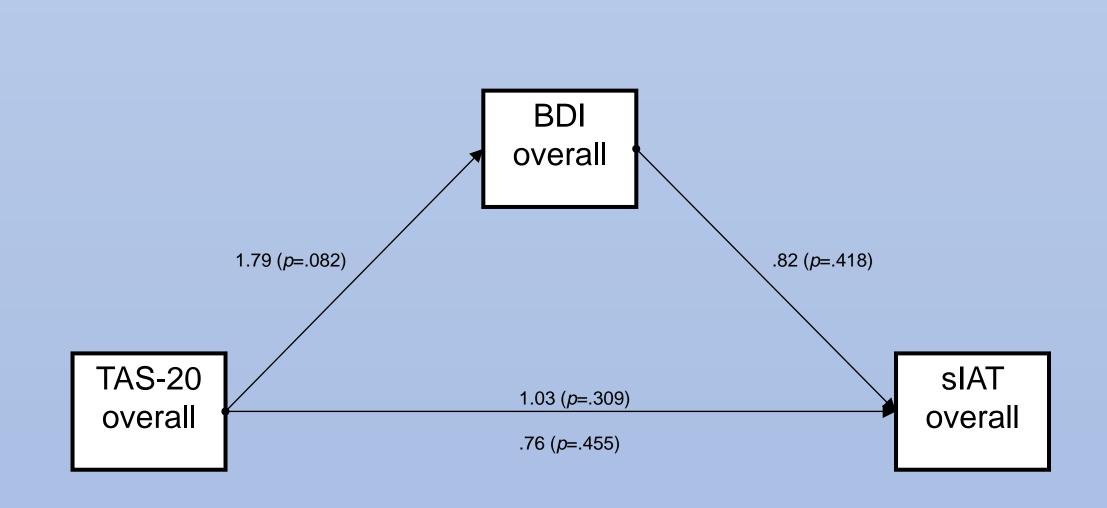


Figure 2 Results from Mediation Analysis within the EG

Conclusion

Alexithymia and IGD seem to be associated, yet in this clinical sample the degree of alexithymia doesn't predict the severity of IGD. Limiting factors are the heterogenous treatment status resulting in high abstinence rates within the EG and the cross-sectional design. Future research should therefor focus on homogenous samples and longitudinal study designs in order to analyze the causal relationship of alexithymia and IGD.

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