



Current Trends in Internet Addiction and Its Management

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Abstract

The total number of internet users in India is expected to increase to over 550 million 2020, and about 72% of users are young adults. At present internet addiction is not recognized in the addictive disorders spectrum and, therefore, no corresponding diagnosis in the Diagnostic and Statistical Manual of Mental Disorder. Internet use disorder/ abuse is characterized by excessive or poorly controlled preoccupations, urges, or behaviours related to internet use that leads to impairment or distress. It is also possible that those who suffer from deeper psychological problems are most attracted to the anonymous interactive environment of the Internet in order to surmount these problems. Co-morbidities include depression, ADHD, impulse control disorders, alcohol abuse, social anxiety etc. Depression and anxiety can also be part of withdrawal symptoms. Its many negative effects can be seen in such individuals and these effects which are discussed in the article below. A number of paper pencil tests are available assess Internet Addiction the most popular being the Internet Addiction Test (IAT) by Kimberly Young. Many treatment options are showing good results include practicing the opposite, external stoppers, use of alarm clocks, proper schedule, recovery groups and family support.

Keywords: Internet addiction; Compulsive web surfing; Gaming addiction; Online addictions

Introduction

In India the number of internet users is expected to exceed 550 million and more in 2020 [1] and among these about 72% of users are young adults [2]. The profile of a typical Internet user in India is as follows: youths (82%), accessing Internet through cyber cafes (97%), with the aim of checking mail (93%), and for general information search (89%) [3]. Internet addiction disorder (IAD) is of varied types including information overload or compulsive web surfing; computer addiction of programming or game playing; compulsions of online auctions; gambling or trading; and online-sexual relationship addictions [4,5]. At this time internet addiction is not recognized within the addictive disorders spectrum and, therefore, no corresponding diagnosis in the Diagnostic and Statistical Manual of Mental Disorder. Unfortunately the proposal for its inclusion within the fifth

edition of the Diagnostic and Statistical Manual of Mental Disorder (DSM) was not accepted. Internet use disorder/ abuse is characterized by excessive or poorly controlled preoccupations, urges, or behaviours associated with internet use that leads to impairment or distress. It shares the characteristics of addictive disorders like salience, mood dysregulation, tolerance, withdrawal symptoms, and relapse [6]. It may operate on triggers or cues which cause net binges because it provides emotional relief, mental escape, and ways to avoid problems as do alcohol, drugs, food, or gambling. Therefore, the origins for such net binges may be traced back to the four types of triggers which can be present- (a) applications, (b) feelings, (c) cognitions, and (d) life events. We need to decide which applications are most problematic for the addicted user. An intensive assessment should include an examination of the extent of use among particular applications [7]. Internet use provides an artificial, temporary feeling of

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security or calm, of self-worth or accomplishment, of power and control, or intimacy or belonging [8]. Maladaptive cognitions like low self-worth, and depression trigger pathological Internet use. People who suffer from deeper psychological problems could also be those who are drawn the most to the anonymous interactive capabilities of the web so as to overcome these problems [9,10]. Individuals who are dissatisfied or upset by a specific area or multiple areas of their lives have an increased likelihood of developing Internet addiction because they don't have another ways of coping [9,10]. Co-morbidities include depression, ADHD, impulse control disorders, alcohol abuse, social anxiety etc [11,12]. Depression and anxiety may be a part of withdrawal symptoms [13]. There is evidence for involvement of specific serotonin genotype in internet addiction and depression indicating similarities of neurochemical changes in both disorders [14]. Reasons for excessive internet use vary. Some use the internet to get rid of their lonely feeling; others to cope with life stressors or depression. Excessive internet use by some people with social anxiety may be a means to gratify their desire to socialize and also an attempt to overcome their anxiety for face to face interactions. Intra-family conflicts and permissive or indulgent parenting has been shown to be related to excessive internet use.

Adverse Effects of Excessive Internet Use

It has many negative effects. Due to excessive internet used people are less motivated to interact with each other. As a result they tend to spend less time in the company of family members and friend. Over a period of time this leads to social isolation and depression. At home parents and adolescent children may vie to use the internet. This adds to new struggles in the family life leading to incompatibility and, deterioration in the mental health and increasing stress and isolation [15]. The increasing use of internet affected national and religious identity, self-identity, and mental health [16]. Sleep patterns are disrupted due to late night log-ins. In extreme cases, caffeine pills are used to stay awake for longer sessions. Sleep deprivation causes fatigue, academic or occupational impairment and decrease in immunity. The sedentary act of computer use results in a lack of exercise and leads to an increased risk for carpal tunnel syndrome, back strain, or eyestrain. There is also a rise in divorce cases due to the online affairs [17]. Students may have a decline in study habits, drop in grades or missing classes due to excessive Internet use.

Tests Used to Assess Internet Addiction

Internet Addiction Test (IAT) developed by Kimberly Young [18] is a self-rated scale prepared for use as a screening tool and assessing the level of internet addiction. It is a popular scale that has been used all over world. It contains 20 questions related to internet usage to be scored on Likert scale from 1(rarely) to 5

(always). A total score of <20 represent normal user, between 20 to 49 represent mild addiction, between 50 to 79 represent moderate addiction, between 80 to 100 severe addiction. Internet use to the point of addiction, however, can have wide-ranging consequences that can affect personal, occupational, social, physical and psychological domains of the individual's life. Serious relationship problems including conflicts in marriage and high rate of divorce due to "cyber affairs" have been reported by various studies [19]. Internet-Related Problem Scale (IRPS) [20] was developed by Armstrong et al. It is a 20-item scale comprising questions relating to tolerance, craving, and negative impacts of Internet use. It significantly correlated to the number of hours spent online and the MMPI-2Addiction Potential Scale.

Management

Many Treatment options are available. Practicing the Opposite which involves reorganization one's time is a major part of treatment. The aim is to have patients disrupt their normal routine and re-adapt new time patterns of use and thus, break the habit. External Stoppers are helpful wherein the patient uses concrete things that the patient needs to do or place to go as prompters to help log off. Use of alarm clocks might help. Many attempts to limit Internet usage fail because of ambiguous plans. A proper schedule of Internet usage will give the patient a sense of being in control, rather than allowing the Internet to take control. The patient should make a list of the, (a) five major problems caused by addiction to the Internet, and (b) five major benefits for cutting down Internet use or abstaining from a particular application. The patient should transfer the two lists onto an index card and take out the index card as a reminder to reflect on the problems caused by their Internet overuse. Recovery groups address the maladaptive cognitions and provide an opportunity to build real life relationships that will release their social inhibitions and need for Internet companionship. These groups may help the Internet addict find real life support to cope with difficult times during recovery similar to AA sponsors. It is necessary among addicts whose marriages and family relationships have been disrupted. Intervention should focus on several main areas: (a) educate the family on how addictive the Internet can be, (b) reduce blame on the addict for behaviours, (c) improve open communication about the pre-morbid problems in the family which drove the addict to seek out psychological fulfilment of emotional needs on-line, and (d) encourage the family to assist with the addict's recovery such as finding new hobbies, taking a long over-do vacation, or listening to the addict's feelings. A strong sense of family support may enable the patient to recover from Internet addiction [21].

Conclusion

With the increasing availability and low cost of internet use the users of internet are multiplying. The advent of smartphone has greatly improved the accessibility and more people are spending increasing amounts of time on the net. It is likely that the number of people with internet addiction will increase in the future. It is time that the disorder is recognized and treated before it takes epidemic proportions.

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