Clinical validation of the C-VAT 2.0 assessment tool for gaming disorder: A sensitivity analysis of the proposed DSM-5 criteria and the clinical characteristics of young patients with ‘video game addiction’

# Details

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## Topics

## Sample

"Patients were only included in the study if they reported directly for gaming disorder, or if gaming related activities were readily apparent in the intake session. The study involved only youth clinics for addiction care, limiting the possible age range from 12 to 23 years old." (van Rooij et al., 2017, p. 270)
"In the period July 2013 to November 2014 a total of 66 patients were recruited from eleven participating institutions for addiction care in the Netherlands. A further nineteen institutions did not want participate in the study for various reasons: they did not treat gaming problems, did not view game problems as a disorder, or were having organizational issues which left no room for participation in studies. Since we were interested in a patient sample, it was crucial to know whether after intake participants were actually admitted to treatment for gaming disorder (as assessed in the follow-up). We therefore excluded 26 cases for which no follow-up data could be obtained for various reasons, which included administrative problems at some institutions. Three cases were removed since they were older than 23 years. Two further cases were removed for having missing crucial data (including age). This left a total of 35 cases, of which 32 were identified as ‘game addicted’ by the treating therapist during the follow-up." (van Rooij et al., 2017, p. 271)

# Abstract

Aims
Clinicians struggle with the identification of video gaming problems. To address this issue, a clinical assessment tool (C-VAT 2.0) was developed and tested in a clinical setting. The instrument allows exploration of the validity of the DSM-5 proposal for ‘internet gaming disorder’.

Method
Using C-VAT 2.0, the current study provides a sensitivity analysis of the proposed DSM-5 criteria in a clinical youth sample (13–23 years old) in treatment for video gaming disorder (N = 32). The study also explores the clinical characteristics of these patients.

Results
The patients were all male and reported spending extensive amounts of time on video games. At least half of the patients reported playing online games (n = 15). Comorbid problems were common (n = 22) and included (social) anxiety disorders, PDD NOS, ADHD/ADD, Parent–Child relationship problem, and various types of depressive mood problems. The sensitivity of the test was good: results further show that the C-VAT correctly identified 91% of the sample at the proposed cut-off score of at least 5 out of 9 of the criteria. As our study did not include healthy, extreme gamers, we could not assess the specificity of the tool: future research should make this a priority.

Conclusion
Using the proposed DSM-5 cut-off score, the C-VAT 2.0 shows preliminary validity in a sample of gamers in treatment for gaming disorder, but the discriminating value of the instrument should be studied further. In the meantime, it is crucial that therapists try to avoid false positives by using expert judgment of functional impairment in each case.

# Outcome

"The patients were all male and reported spending extensive amounts of time on video games. At least half of the patients reported playing online games (n = 15). Comorbid problems were common (n = 22) and included (social) anxiety disorders, PDD NOS, ADHD/ADD, Parent–Child relationship problem, and various types of depressive mood problems. The sensitivity of the test was good: results further show that the C-VAT correctly
identified 91% of the sample at the proposed cut-off score of at least 5 out of 9 of the criteria. As our study did not include healthy, extreme gamers, we could not assess the specificity of the tool: future research should make this a priority" (van Rooij et al., 2017, p. 2017)

- Clinicians struggle with the identification of video gaming problems.
- The C-VAT 2.0 assessment tool for gaming disorder was developed and clinically tested.
- C-VAT 2.0 both covers and expands the DSM-5 criteria for Internet Gaming Disorder.
- The DSM-5 cut-off score of 5 or more out of 9 items had high sensitivity (91%) in this study.
- Patients with gaming problems showed frequent comorbid problems, e.g. depression and anxiety.