

## Point of View



## Internet addiction disorder: overview, controversies and future implications

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The modern world has been following a vast technological evolution during the past few decades witnessing enhanced accessibility to information through internet use. The usage of online activities has become an integral part of the lives of people with time. Although the positive aspects of the internet have been readily praised, there is a growing amount of literature on the negative side of its excessive and pathological use. Internet addiction disorder (1) is defined as a person who fulfils any five of the eight adapted criteria:

1. Preoccupation with the internet
2. Need for increased time spent online to achieve the same amount of satisfaction
3. Repeated efforts to curtail internet use
4. Irritability, depression or mood lability when internet use is limited
5. Staying online longer than anticipated
6. Putting a job or relationship in jeopardy to use the internet
7. Lying to others about how much time is spent online
8. Using the internet as a means of regulating mood

Internet addiction disorder is considered a complex disorder in terms of its unique clinical manifestations, diagnosis and conceptualization. Individuals who are suffering from the disorder

spend time solitarily and excessively in fantasies with less time being spent with real people. Some may create online profiles where they can hide their identities and pretend to be somebody rather than themselves (2). The use of internet activities has become an integral part of the lives of people at present. At the same time, a few behavioural patterns have been identified similar to other behavioural addictions among frequent internet users, such as tolerance, withdrawal, failure to quiet and distraction to daily activities.

There were a number of neurobiological and imaging studies on excessive usage of the internet which showed biological changes in the pre-frontal cortex in the human brain, which is similar to addiction syndromes. Structural changes in the brain occur in the temporal cortex too with compromising activities of long-term planning, increasing impulsive risk and loss of control over internet use (3). Internet addiction disorder may lead to symptoms of anxiety and depression. Individuals who are attempting to quit their internet use can have withdrawal features like mood swings, irritability, sadness and restlessness. It can also be reflected in physical symptoms like headaches, back pain, eating irregularities, sleep disturbances and features of carpal tunnel syndrome. There are many warning signs which have been identified, such as excessively

thinking about the past and future online activities, increasing time of engaging on the internet, repeated and unsuccessful efforts to stop internet use, risk of affecting significant relationships and use of the internet as a way to escape from problems (1).

Twenty-five years before, a New York psychiatrist suggested one of the first diagnostic tests for internet addiction disorder by posting a note in an online psychiatric bulletin and named it “creating a fictitious disorder called internet addiction disorder” (4). The initial published work on the disorder was a case history in 1996 by Dr Kimberly Young. The concept of internet addiction disorder began in her mind as a pet project since a close associate of hers appeared to be addicted to internet chat rooms and spending many hours online (5).

Over the last twenty years, discussions on internet addiction disorder have greatly increased. Alongside this, there had been many scholarly debates about whether internet addiction disorder really exists. The controversies were ranging in relation to conceptual, technical and practical aspects. Arguably, one of the most important issues in the scope of internet addiction disorder at present is the lack of consensus on a case definition for the disorder. This has largely contributed to limited research evidence about the conceptualization, epidemiology, aetiology and course of internet-related disorders and makes it difficult to derive prevalence data in different parts of the world. Meanwhile, another major challenge in analysing prevalence rates of the disorder had been due to various instruments being used to assess the addictive behaviour. This makes it difficult to compare prevalence rates across countries. Furthermore, the researchers debate that the internet is undoubtedly a useful commodity in the modern era.

Translating symptoms into diagnostic criteria of internet addiction disorder required substituting ‘internet’ for ‘substance’. This has led to many debates on the diagnosis of internet addiction

disorder. However, following the introduction of the term behavioural addiction, which is a relatively new concept in psychiatry, internet addiction disorder has been surveyed under that category. Internet addiction disorder has still not been officially recognized as a disorder by the entire psychiatric community. Experts proposed diagnostic criteria for internet addiction disorder by using pathological gambling as a model and suggested the disorder needs to be included in the next iteration of the Diagnostic and Statistical Manual of Mental Disorders (DSM). Since then, internet addiction disorder has been extensively researched and considered for the inclusion in DSM, fifth edition (DSM-5). However, the condition has still not been recognised as a disorder in it. This controversy around the diagnosis of internet addiction disorder includes whether the condition is a separate clinical entity or a manifestation of underlying psychiatric disorders. Nevertheless, internet gaming disorder, a subcategory of internet addiction disorder is listed in DSM-5 and International Classification of Diseases (ICD)-11. The DSM-5 claims that there is insufficient peer-reviewed evidence to establish diagnostic criteria and course descriptions for internet addiction disorder to be identified as a mental disorder (1).

Based on a variety of viewpoints, the unavailability of universally standardised or agreed definitions, and difficulties in developing evidence-based recommendations, internet addiction disorder has not yet been included in the WHO's ICD-11. However, mental healthcare professionals in many countries are increasingly requesting the authorities to identify Internet addiction disorder as an independent disorder in the proposed ICD. Meanwhile, the WHO working group on the classification of obsessive-compulsive and related disorders has announced that the inclusion of internet addiction disorder in the forthcoming revisions of the ICD is a key controversy and based on the limited current data (4). Even with these controversies and many debates around the topic, anybody cannot ignore the numbers and the seriousness of cases reported all over the

globe.

The international research community is responsible for conducting further research, defining the concept, finding out the aetiology, developing valid and reliable diagnostic criteria and developing effective management strategies for effective prevention of the condition.

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