Internet Addiction, Internet Psychotherapy

TO THE EDITOR: In their recent review of the Internet and psychiatry, Milton P. Huang, M.D., and Norman E. Alessi, M.D. (1), comprehensively discussed the potential of the Internet for patient education, clinical care, research, and administration. They made little mention, however, of two phenomena that may be of increasing relevance to psychiatry.

The first is that of "Internet addiction"—excessive time spent on the Internet or replacement of genuine real relationships with superficial virtual ones—which is accompanied by marked clinical distress or functional impairment. Despite the failure of this putative diagnostic entity to gain entry into DSM-IV, there is already a light-hearted on-line literature pertaining to the phenomenon. While the terms "addiction" (2) and "compulsion" (3) in this context are probably incorrect, the phenomenon of intense attachment to computers seems to be a real one (4). More broadly, it may be argued that an adequate history of a patient's computational life can be important in understanding his or her psychopathology and psychodynamics. Just as the investigation of modern computer culture has been used to shed light on sociological themes (5), so the individual's interactions with the computer may reveal issues of clinical importance.

The second is that of "Internet psychotherapy." While physicians can make their Internet addresses available to patients, more unique to the Internet are discussion groups or newsgroups. These differ widely in their focus, but a number are devoted to specific psychiatric disorders such as obsessive-compulsive disorder. Subscribers send electronic mail to a computer server, which then distributes messages automatically to all other subscribers. Each message is given a header (e.g., "Meds for OCD") by the sender, so that a series of messages, or a virtual conversation, tends to develop around a number of themes or issues. A recent survey of subscribers to one obsessive-compulsive disorder mailing list found that subscribers were generally positive about the benefits of belonging to the list, describing it as a useful source of information and a helpful source of support (6). Further study of other Internet newsgroups for psychiatric disorders seems warranted.

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Drs. Huang and Alessi Reply

TO THE EDITOR: In response to our recent article, Dr. Stein comments on two phenomena related to the Internet that we

did not specifically discuss: Internet addiction and Internet-based psychotherapy.

Such commentary is important. Out of necessity, our review article was simplistic and time limited in both scope and depth. Information technology continues to be introduced at an everincreasing rate and will affect all areas of society, many of which we cannot anticipate. The Internet itself will be transformed in ways that will make it unrecognizable, shaped by other technologies that will become an integral part of our lives (1). As we continue to work with people and their mental lives, these changes will produce phenomena never seen before, new types of treatment, and possibly the development of completely new disorders. Ongoing discussion and review of these issues will become a part of our professional duty.

We need to be critical in our examination of the impact of the Internet within this context. As professionals who are trained as physicians and clinical scientists, we must restrain ourselves from offering simplistic, "popular" labels for potentially complex phenomena. While a number of individuals who use computers may manifest symptoms consistent with an "addiction," labeling it as if it were a new diagnostic entity may lead to the misdiagnosis of primary psychiatric disorders for which we have proven therapeutic interventions. Early research is beginning to look at case reports that depict what this diagnostic entity might be (2), although other research questions the true impact of this type of phenomena (3). The process of disease substantiation will require 1) rigorous study through published case reports that define the phenomena, 2) standardized structured interviews to identify populations for controlled studies of hypotheses that relate genetic, biologic, and psychosocial variables, and 3) replication of findings.

Study of new psychotherapeutic treatments mediated by the Internet will also be important. As Dr. Stein mentions, e-mail and newsgroups are already being used to communicate with patients. Chat groups and video technologies in the form of telemedicine are also being used (4). We need to understand more about how these technologies both obscure and contribute to treatment. What permits a feeling of trust or intimacy? How do different individuals use these media to control relationship boundaries? Measurement of timing, quantity, intensity, affect, and content of such communications will give us insight into the answer to these questions as well as provide new tools for looking at the therapeutic process in general.

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