



<p>Guercio et al. (2012). Behavioural treatment for pathological gambling in persons with acquired brain injury. <i>J Appl Behav Anal</i>, 45(3): 485-495.</p>	<p>RoBiNT score - 15/30</p>
<p>Method / Results</p>	<p>Rehabilitation Program</p>
<p>Design</p> <ul style="list-style-type: none"> • Study Type: SCD. Concurrent multiple baseline. • Population: n=3 who had suffered ABI and were engaged in pathological gambling. <ul style="list-style-type: none"> ○ Participant 1: female, age 31, frontal lobe injury (all-terrain vehicle accident). ○ Participant 2: male, age 40, ABI (vehicle vs. pedestrian accident). ○ Participant 3: male, age 49, ABI (boating accident). • Setting: University Gambling Intervention Program – simulated gambling room. <p>Target behaviour measure/s:</p> <ul style="list-style-type: none"> • Monetary expenditures during gambling opportunities – the amount of poker chips or lotto tickets. <p>Primary outcome measure/s:</p> <ul style="list-style-type: none"> • Gambling Symptom Assessment Scale (G-SAS). <p>Results: Visual analysis of graphed data showed all participants wagered less as they were exposed to the intervention package during clinic sessions. The scores on the G-SAS for all participants decreased in both clinic sessions and generalization probes following the introduction of treatment. Follow-up data suggest a moderate reduction in gambling behaviour and self-reports from baseline levels.</p>	<p>Aim: To reduce urges to gamble and actual gambling.</p> <p>Materials: Specific protocol (a CBT package) based on the text and accompanying training materials of Petry (2005).</p> <p>Treatment Plan:</p> <ul style="list-style-type: none"> • Duration: 8 weeks. • Procedure: 1-hour sessions being held weekly. • Content: Week: <ol style="list-style-type: none"> 1. Review of gambling history; weekly graphing of gambling behaviour; self-reinforcement established. 2. Situational analysis of gambling behaviour; antecedent events review; functional analysis of gambling behaviour. 3. Alternative replacement behaviour reviewed via 50-item leisure list. 4. Review of alternative activities; antecedent management. 5. Analysis of urges associated with cravings; relaxation strategies; systematic desensitization. 6. Role of negative reinforcement and personal conflict; assertiveness training; role play. 7. Role of covert rules; “cognitive” bias; review of odds; exercises to depict odds prediction. 8. Management of positive and negative future life events; 1- to 10-year plan for handling future life events. <p>Participants were also instructed to self-record various behaviours each week and to bring these assignments to therapy the next week (including gambling behaviour, self-reinforcement, activity list).</p>

Note that these rehabilitation summaries reflect the current literature and the treatments are not necessarily endorsed by members of the NRED Team.