ABSTRACT: Individuals involved in compulsive activities as different as sex, drugs, eating, crime and gambling exhibit remarkably similar behaviors with regard to their addiction. The authors apply a unified model of addiction which relates these behavioral similarities to manifestations of altered neurochemistry in that portion of the limbic system responsible for reward. Certain individuals whose genetic or environmental situation creates a deficit of dopamine in the reward system are prone to anxiety, craving and general lack of feelings of well-being. In order to satiate these feelings, they may engage in any number of activities or drugs which temporarily restores dopamine neurotransmission.

INTRODUCTION

Jill is addicted to eating. Her drug of choice is carbohydrates. As she stands in front of the mirror and sees her once trim size six figure balloon into 195 pounds she becomes depressed. This depression is temporarily alleviated as she "pigs out" on ice cream and cookies.

Sean is addicted to alcohol. After many attempts, he is unable to...
stop drinking despite adverse consequences. His personal, professional, and social life is in shambles.

David is addicted to sex. He must seek increasing amounts of exciting sexual experience, often at great personal, financial, and social risk to satisfy his craving. Fear of AIDS haunts him daily.

Mary is addicted to cocaine. Her addiction has depleted her savings and cost her the loss of her family and boyfriend. She now prostitutes her body to obtain money for her addiction. Most of her waking hours are centered around satisfying her addiction.

Harold is addicted to gambling. His addiction has cost him his job, home, family, and self-esteem, yet he continues down his destructive pathway.

Lora is addicted to heroin. Her habit has taken her from one drug house to another where needles and sex are shared. She is now HIV positive and pregnant.

Eating, alcohol, sex, cocaine, gambling, heroin! How can such diverse substances and behaviors all be called addicting? Are we not overusing the term “addiction”? It seems that the opinion of the general public as reflected in the popular media is that almost any repetitive behavior may be classified as an addiction. Witness the explosion of support groups for behaviors such as overeating, excessive gambling, overindulgent sex, and television fascination as well as chemical dependency and one could be led to believe that there are as many addictions as there are activities.

However, addiction is not a term to be used lightly at a cocktail party. The person who jokingly suggests “I’m addicted to chocolate” downplays the devastating effect of true behavioral and neurochemical addiction whether it be to non-drug activities or to substance abuse itself. True addiction is characterized by “compulsion, loss of control, and continuation in spite of harmful consequences.” Unless a behavior encompasses these three components it should not be classified as an addiction. The conduct of our six individuals clearly fits this description; occasionally overeating, including chocolates, does not. Furthermore, we believe that regardless of the addicting agent addictions are characterized by remarkably consistent behavior patterns as well as similar neurochemical changes.

BEHAVIORAL COMMONALITIES

As we watch Jill, Sean, David, Mary, Harold, and Lora struggle to regain control of their lives, we cannot help but be struck by the similarities of their behaviors. Carnes (1991) has developed a list of