

Patient A, male, 19 years old at the time of first visit.

Chief complaints: lack of control over internet gaming

Developmental history:

Patient A is the younger of the two siblings. He grew up in a middle-class family in an urban area. He was not good at talking with people since when he was a child. He was enrolled in a kindergarten for three years, but he had difficulty adjusting to the kindergarten for a month. At the age of 5, he started to play Nintendo DS. He made friends through games and began to visit his friends' house to play games. He entered a local public elementary school. His academic performance was just about average. He was not particularly noticeable in the classroom, and he spent lunch time with friends talking about games.

Current history:

He moved to a new city when he was in the second year of junior high school. Since then, he could not make close friends. Every day, he came home as soon as he finished school and played games alone. He spent so much time playing games that he started to stay up until very late and sleep during the day, and he was unable to complete his school assignments during winter vacation. His teacher reproached him for failing to complete the school assignments, which led him to start refusing to go to school. When his parents threatened him that his gaming device would be confiscated unless he learned to refrain himself, he promised that he would play game only on weekends. However, it was before two weeks passed when he started to play games again behind his parents' back on weekdays. His father took away his gaming device, which then prompted him to play online games using a computer available at home. Patient A tried to attend school when he moved on to the third year of junior high school, but after the first week he stopped going to school. He got enrolled in a correspondence high school*, but he withdrew to his room and kept playing games, not working on his assignments at all. Even when his family told him to come out for meals, he did not until he was ready to take a break. When he was hungry, he brought snacks and soda into his room and ate them. He often went on without taking a bath for a week and only changed his clothes once in a while. His parents once attempted to drag him out of his room by force, only in vain because he violently refused. His father tried disconnecting the internet during the day, but he figured out a way to put it back online while his parents were away. He turned 19 years old with no credit at all from high school. His parents threatened him to make a choice between dropping out and seeking for medical attention, and he chose the latter, though reluctantly.

* *Correspondence high school* is a type of high school where physical attendance is not required every day. Frequency of attendance is often left up to each student. Students learn through take-home assignment, essays, take-home exams and so on in place of face-to-face classroom lessons.

Please address **all of the 4 items** below in your abstract.

1. How do you diagnose him if he came to visit a hospital in your country? Please include examination methods, considerable comorbidities and/ or differential diagnoses in your response.
2. Please describe recent major problems that are associated with the spread of the internet use in your country. Problems might include, though not limited to, average time spent on gaming and/or internet use, age at which children come in contact with internet media, changes in sleeping hours, problems with children's online purchases, harmful services such as dating apps, etc.
3. How do you estimate the prevalence of gaming disorder in your country?
4. How do you treat gaming disorder in your country/at your hospital in the present situation? What kinds of treatment strategies or support systems do you think will be needed in the future? Please state the role that psychiatrists should play in prevention, early detection and intervention.