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INTERNET ADDICTION: DIAGNOSIS CRITERIA AND METHODS

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This article presents a review of the literature and analyzes scientific studies on the prevalence of Internet addiction in different countries. The authors conducted a scientific search using the relevant keywords in the PubMed and Google Scholar search engines, in the Scopus, Web of Science, MedLine, The Cochrane Library, EMBASE, Global Health, CyberLeninka, RSCI and others databases.

Keywords: Internet addiction; adolescence; age-related features of addictions; anxiety, prevention

Internet addiction (IA) or Internet addiction (ID) is a compulsive and excessive use of the Internet with spending a lot of time on the Internet.

It should be noted that there are no strictly limited definitions of IA and verified general diagnostic criteria, which is a limitation for the analysis of the prevalence of IA [V.L. Malygin et al., 2001]. Also, the inconsistency of the data is associated with various methods and diagnostic criteria for IA and understanding the IA phenomenon itself, used by the authors of scientific publications [V.L. Malygin et al., 2001].

In a number of studies, IA is considered in 3 variants: pathological enthusiasm for the Internet; Internet addiction syndrome and IA as an independent nosological entity [V.L. Malygin et al., 2001].

Orzack M.N. [16, 17] considers the psychophysiological symptoms of ID and proposes criteria for determining ID (psychological symptoms, physiological symptoms) [16, 17], which allow diagnosing the development of addiction.

In modern studies of CI assessment, the most popular methods are those proposed by K. Yang and I. Chen (adapted by V.L. Malygin).

This review analyzes scientific studies on the prevalence of AI in different countries. Thus, according to the results of studies conducted by L. Ghassem zadeh et.al in Iran (Tehran) using variations of the Yang test (IAD), 3.8% of Internet-dependent university students were found. In the USA, Aboujaoud e E. et.al (2006) used 4 variants of diagnostic criteria, differing in diagnostic thresholds and IA was established in 0.3% -0.7% of students [12, 13].

It should be noted that in the studies of Chou and Hsiao (2000, Taiwan), 5.9% of students were found to have Yang test. In Korea, Kim et.al (2005) in schoolchildren aged 15-16 years, using the variation of the Yang test (IAD), 1.6% were diagnosed as diagnosed as Internet addicts and 37.9% of schoolchildren prone to IDD [14, eighteen]

In 2004, a national adolescent research project in Finland included the diagnosis of IA. In Kaltiala-Heino R. et.al. adapted criteria for pathological gambling according to the DSM-IV classification were used and AI was found in 1.7% of boys and 1.4% of girls [10].

In Russia in 2011 Malygin V.N. et al. [6] on the Chen scale (adapted by Feklisov K.A., Malygina V.L.) found CI in 3.69% of all examined schoolchildren. According to Tereshchenko S. et al. (2021) the prevalence of ID among adolescents in the Russian Federation is 7.1-10.4%, depending on the content consumed [15].

According to its diagnostic criteria, Chen's Internet Addiction Test (CIAS) [11, 12] is the closest to 6 diagnostic components universal for all variants of addictions [R. Brown, 1993; M. Griffiths, 1996].

A number of studies [1, 3, 5] found that people of early adolescence [2, 4, 7] who are prone to IS have anxiety-depressive states, difficulties in performing work, and high excitability.

The results of studies of IA conducted in different countries of the world prove that this phenomenon has a global prevalence and currently there are questions about the nosological affiliation, diagnostic criteria, clinical manifestations, and especially the prevention of IA.

Thus, IS is widespread among children, adolescents and adolescents, and every year their number is increasing. In most of the studies conducted to identify IS, the most accessible research methods were

used – questionnaires, questionnaires. The results obtained can provide additional information for a personalized prognosis and are aimed at the correction and prevention of IS.

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