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Internet Addiction

Addiction à Internet

1. Generic Acupuncture

1.1. Tian 2025 (Network Meta-Analysis)

Tian JJ, He XY, Guo Z. Optimal Non-Pharmacological Interventions for Reducing Problematic Internet Use in Youth: A Systematic Review and Bayesian Network Meta-Analysis. Behav Sci (Basel). 2025 Jan 20;15(1):98. doi: 10.3390/bs15010098. PMID: 39851902.

Objective	The purpose of this network meta-analysis (NMA) is to compare the effect of different non-pharmacological interventions (NPIs) on Problematic Internet Use (PIU).
Methods	Randomized controlled trials (RCTs) published from their inception to 22 December 2023 were searched in Cochrane Central Register of Controlled Trials, Embase, Medline, Web of Science, China National Knowledge Infrastructure, China Science and Technology Journal Database, Chinese BioMedical Literature Database, and WanFang Data. We carried out a data analysis to compare the efficacy of various NPIs using Bayesian NMA. A battery of analyses and assessments, such as conventional meta-analysis and risk of bias, were performed concurrently. Two reviewers extracted data and evaluated bias using the Cochrane Risk of Bias tool independently.
Results	We identified 90 RCTs including 15 different NPIs (5986 participants), namely sports intervention (SI), electroencephalogram biological feedback (EBF), reality therapy (RT), positive psychology therapy (PPT), sandplay therapy (ST), educational intervention (EI), compound psychotherapy (CPT), **electroacupuncture therapy (AT)**, group counseling (GC), family therapy (FT), electrotherapy (ELT), craving behavior intervention (CBI), virtual reality therapy (VRT), cognitive behavior therapy (CBT), and mindfulness therapy (MT). Our NMA results showed that SI, EBF, RT, PPT, ST, EI, CPT, **AT**, GC, FT, ELT, CBT, CBI, VRT, and MT were effective in reducing PIU levels. The most effective NPI was SI (SMD = -4.66, CrI: -5.51, -3.82, SUCRA = 95.43%), followed by EBF (SMD = -4.51, CrI: -6.62, -2.39, SUCRA = 90.89%) and RT (SMD = -3.83, CrI: -6.01, -1.62, SUCRA = 81.90%).
Conclusion	Our study showed that SI was the best NPI to relieve PIU levels in youth. Medical staff should be aware of the application of SI to the treatment of PIU in youth in future clinical care.

1.2. Zhou 2024 (network meta-analysis)

Zhou Z, Wan Y, Li C, Yuan J, Gao G, Cui H, Li J, Zang L. Effectiveness of sports intervention: A meta-analysis of the effects of different interventions on adolescent internet addiction. J Affect Disord. 2024 Nov 15;365:644-658. https://doi.org/10.1016/j.jad.2024.08.064

Backgound	To evaluate the effects of different interventions on adolescent internet addiction, a meta-analysis and network meta-analysis were performed to determine the possible intervention effects of these interventions.

Methods	Computer searches of the China National Knowledge Network, Wanfang, VIP, EMBASE, PubMed, Web of Science, EBSCO, and Cochrane Library databases were performed. The relevant randomized controlled trials were designed to assess the effects of interventions on adolescent internet addiction. The retrieval period ranged from the establishment of the database to January 31, 2024. Literature screening, data extraction, and bias risk assessment were carried out independently by two researchers. CMA 3.3, Stata 17.0 software and Review Manager 5.3 were used for the data analysis.
Results	A total of 89 studies with 6876 samples were included. A traditional meta-analysis of 51 single interventions and controlled studies revealed that sports intervention, cognitive behavior therapy, family therapy, mindfulness intervention, attention bias training and group counseling significantly improved adolescent Internet addiction [standardized mean difference (SMD) = -1.75, 95 % CI (-2.07, -1.44), $p < 0.01$; $I2 = 94$ %] compared to no-treatment groups. A network meta-analysis showed that combined intervention (Sucra = 93.5) had the highest probability of being the best intervention for adolescent Internet addiction, and **acupuncture** interventions showed the most promise as a single intervention modality; however, due to the limited number of studies, we believe that sports intervention could be the most appropriate single intervention.
Discussion	The evidence provided by existing studies shows that compared with other single interventions, combined interventions have the greatest effect on adolescent IA, and sports may be the best single intervention. However, because of the limitations of sample size and quality of individual studies, the strength of the evidence still needs to be further verified by additional standardized and high-quality studies.

1.3. Ayub 2023

Ayub S, Jain L, Parnia S, Bachu A, Farhan R, Kumar H, Sullivan A, Ahmed S. Treatment Modalities for Internet Addiction in Children and Adolescents: A Systematic Review of Randomized Controlled Trials (RCTs). J Clin Med. 2023 May 8;12(9):3345. https://doi.org/10.3390/jcm12093345

Background	In recent years, the use of the internet among children and adolescents has dramatically increased, leading to growing concerns regarding the potential risks of excessive internet use and addiction. Addressing these concerns, this systematic review aims to summarize current evidence on the effectiveness of treatment interventions for internet addiction among children and adolescents.
Method	We performed a systematic review using PubMed, Web of Science, PsycInfo, and Google Scholar with search terms including “internet addiction”, “problematic internet use”, “children” or “adolescents”, “treatment” and “randomized controlled trial”. We found 10 Randomized Controlled Trials (RCTs) meeting the criteria and included them in this systematic review.
Results	This systematic review analyzed 10 randomized controlled trials focused on treatment interventions for internet addiction in adolescents and young adults. The interventions used were diverse, including cognitive-behavioral therapy (CBT), medication, **electro-acupuncture (EA)**, and solution-focused approaches. The measures used to assess the effectiveness of the interventions also varied, but most studies reported moderate to large effect sizes for at least some outcomes. Overall, the studies suggest that interventions such as CBT and EA can be effective in reducing symptoms of internet addiction, internet gaming disorder, and unspecified internet use disorders. School-based programs and brief manualized CBT programs also show promise, though more research is needed to determine their long-term effectiveness.

Conclusion	Promising treatment approaches for internet addiction are emerging, but inconsistencies in conceptualization, language, and diagnostic criteria present some challenges. The growing recognition of problematic internet use, as shown by the DSM-5's recognition of Internet Gaming Disorder, highlights the need for a multidisciplinary approach and standardized criteria to facilitate accurate reporting across studies. Continued research is needed to identify effective treatments and diagnostic criteria for internet addiction, with the potential to offer practical insights into effective medications and therapies.

1.4. Zhu 2023

Zhu Y, Chen H, Li J, Mei X, Wang W. Effects of different interventions on internet addiction: a systematic review and network meta-analysis. BMC Psychiatry. 2023 Dec 8;23(1):921. https://doi.org/10.1186/s12888-023-05400-9

Background	Globally, Internet is a recognized form of leisure, but there are growing apprehensions about the increasing number of individuals developing an addiction to it. Recent research has focused on social issues associated with internet addiction (IA). However, the treatment of IA is currently unclear. This study aimed to explore the relationship between IA treatment outcomes and different intervention strategies through systematic review and data analysis of patients who received different intervention modes.
Methods	A meta-analysis was conducted using RevMan 5.4 and Stata 14.2 on 57 literature research data from five Chinese and English databases, PubMed, Embase, Web of Science, Wanfang and CNKI.
Result	A total of 57 randomized controlled trials (RCTs) were included in this network meta-analysis involving 3538 IA patients and 13 different interventions. The network meta-analysis results demonstrated that the top four interventions were: rTMS + CBT, drug + others, rTMS, and **electro-acupuncture** + CBT.
Conclusion	Our study indicated that comprehensive therapy had an optimal therapeutic effect on IA patients and rTMS + CBT ranked first among all therapeutic indicators of intervention, indicating optimal clinical effectiveness.

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