## Errata for doctoral thesis: Motivational interviewing (MI) and cognitive behavioral group therapy in the treatment of gambling disorder: Efficacy, sensitivity to contemporary alcohol problems, and processes in MI

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## All items on the errata list refers to the thesis frame

**Location:** Abstract, line 11 - 12.

Original text: the no treatment control showed marginally better outcomes than CBGT and

significantly better outcomes than MI.

**Correction:** MI showed marginally better outcomes than the no treatment control, and CBGT

showed significantly better outcomes than both the control and MI.

**Location:** Abstract, Main conclusions, line 1.

**Add:** CBGT was found to be an efficacious method in the treatment of gambling disorder.

**Location:** Abstract, Main conclusions, line 2.

**Original text:** harmful **Correction:** of little help

**Location:** 3.2 Was study I sufficiently powered? p 16, line 3-4.

**Original text:** MI and CBGT differed only marginally.

Correction: CBGT was not inferior to MI. However, it would have been more correct to use an

equivalence test to investigate whether the treatments were equivalent.

**Location:** 3.2 Was study I sufficiently powered? p 16, line 12

**Add:** nor was study I sufficiently powered to investigate whether MI and CBGT were equivalent.

**Location:** 3.2 Was study I sufficiently powered? p 16, line 15.

**Original text:** If it had been easier to recruit problem gamblers to treatment

**Correction:** Delete

**Location:** 3.7 Ethical aspects, p 22, line 6 - 10.

**Original text:** A pragmatic answer to that question would be that the choice of using a non-inferiority design when comparing MI and CBGT facilitated the comparison between the active treatments and the control group, so that the data collected were used in the best possible way, given the difficulty of recruiting a larger number of study participants needed to power a

superiority trial.

**Correction:** Delete.

**Location:** 4.1 The efficacy of MI and CBGT, p 23, line 7 - 14.

**Original text:** non-significant difference between the two merged active treatments and the control group where the active treatment scored 1.15 higher on the NODS at post treatment compared to controls (p = 0.142). CBGT had a non-significant minimal worse outcome by 0.25 score at post treatment versus controls (p = 0.768), while MI showed a significant worse outcome by 2.18 scores at post treatment (p = 0.010) versus controls. The difference between MI and CBGT was also significant, with MI having a score 1.93 points higher at post treatment compared to CBGT (p = 0.010). The supplementary analysis is contrary to

**Correction:** non-significant difference between the two merged active treatments and the control group where the active treatment scored 1.55 lower (better) on the NODS at post treatment compared to controls (p = 0.055). MI had a non-significant minimal better outcome by 0.57 score at post treatment versus controls (p = 0.527), while CBGT showed a significant better outcome by 2.50 scores at post treatment (p = 0.004) versus controls. The difference between MI and CBGT was also significant, with CBGT having a score 2.05 points lower at post treatment compared to MI (p = 0.006). The supplementary analysis is in line with

**Location:** 4.2 Sub-analysis of participants with risky alcohol habits, p 26, line 2-5.

**Original text:** The supplementary analysis only including persons with gambling disorder revealed that an assessment interview plus waiting list actually was more helpful for the gamblers than an assessment interview plus active treatment.

**Correction:** Delete.

**Location:** 4.2 Sub-analysis of participants with risky alcohol habits, p 26, line 18 - 22. **Original text:** Considering that the control group was found to be better than the active treatments at the post treatment measurement, the result must be interpreted with caution. It cannot be excluded that a no treatment control would have outperformed the active treatments even in this analysis and it is likely that natural recovery accounts for a significant share of the symptom reduction.

**Correction:** Delete.

**Location:** 4.5 Conclusions, p 31, line 8.

**Original text:** harmful **Correction:** of little help

**Location:** 4.5 Conclusions, p 31, line 10 - 12.

**Original text:** CBGT sessions is probably not harmful for people with gambling disorder who voluntarily seek treatment, but the method seems to have little to offer people with gambling disorder in addition to an assessment interview.

**Correction:** CBGT was found to be an efficacious method in the treatment of gambling disorder.