

hooked on prescription painkillers.)

Sneakier than their substance counterparts, behavioral addictions—sometimes called process addictions at treatment centers—are difficult to measure and present a boatload of diagnostic challenges. For years, addiction doctors wouldn't acknowledge them as legitimate—after all, who doesn't love food or sex? A woman who works out every day could be mentally ill or enviably fit; Anne's love addiction stemmed from a serious compulsion, yet wives who cheat on their husbands aren't always addicts. The now-accepted difference between a habit and a dependency lies in this definition of addiction: Continued compulsive use of a mind-altering substance or behavior with negative life consequences. In English: If your behavior harms you or others and you still can't stop, you could be dealing with a serious sickness.

The problem is, it's hard to reflect on whether your tendencies are dangerous when everybody everywhere seems to be addicted to *something*—or at least that's what they say. "I'm so addicted to these cookies," friends confide to each other, or

these jeans, these spinning classes, that dating show. Search the hashtag #addict on Twitter and discover a world of habits and cravings, real and exaggerated: People confess addictions to shoes, diet soda, Forever 21, nail biting, and (naturally) Twitter.

Even life-altering dependencies are now regarded in a more casual way. In the cultural ground zero of Hollywood, for example, addictions, once shameful and scandalous, are almost completely out of the closet. Celebs speak openly about needing rehab, and their relapses somehow seem less shocking. The entertainment industry has been quick to adapt. See: Gwyneth Paltrow's upcoming *Thanks for Sharing*, a movie about sex addicts in a 12-step program. It's a comedy.

"We're living in a time when *addiction* can be said without shame...and that's a good thing," says Anna David, executive editor of *The Fix*, a website dedicated to addiction and recovery. The increased acceptance might help some addicts seek treatment without fear of judgment, says David. But it also has the potential to have a far less helpful effect, according to

neuropsychiatrist Timothy Fong, M.D., codirector of the UCLA Gambling Studies Program. With addiction so glamorized and addiction-talk so common, it can be hard for many addicts to see their problem as a problem... before it's far-gone.

### Addiction Mechanics

In other words, seemingly harmless addiction-speak can give true addicts blanket permission to act out their obsessive impulses under the cover of normalcy, says Fong. Take, for example, one of his recent patients, a woman who started stealing small items from big-box stores three or four times a week because it was the only thing that calmed her down. She didn't want to do it, but she *had* to, she told him. Even so, says Fong, "she never thought of it as an addiction. She thought of it as bad behavior."

Therein lies the crux: While addiction memes on Twitter may be frothy hyperbole, addiction in real life is a life-altering misery—one that almost always starts in the brain. It's hard to fathom, but many nonsubstance addictions affect the brain in almost exactly the same way as a drug or alcohol dependency, says psychologist David Shurtleff, Ph.D., acting deputy director of the National Institute on Drug Abuse (NIDA). MRI scans have shown that snorting cocaine and snarfing a fast-food hamburger light up the same pleasure center in the brain. "The hamburger is highly pleasurable," explains Shurtleff. "Some people might find it so pleasurable that they will overeat to the point of bingeing. They want more and more and more, because their compulsive craving for it has overcome their ability to stop."

While all addictions share certain brain biology (see "This Is Your Brain on Addiction," page 133), who gets hooked and who doesn't is an infinitely complex matter. The focus of addicts' obsessions has to do with how they were raised, and the habits and substances they were exposed to early in life. Studies also point to inherited genes associated with behaviors that lead to addictions in general, which may be why so many addicts are tempted by more than one substance or behavior, or seem to transfer their compulsions (e.g., an alcoholic who stops drinking only to become an exercise fanatic). But the biggest insight into addiction mechanics—one Anne might have benefited from knowing before she lost her job, marriage, house, and kids—has to do with gender.

## WHEN DANGER SNEAKS UP ON YOU

Some hard-to-measure addictions can snowball so slowly that by the time you realize you're in trouble, you're already in too deep, says neuroradiologist Louis M. Teresi, M.D. Learn how to ID the signs of dependence and pull yourself back from developing a "soft" addiction to behaviors like obsessively checking e-mail, blogs, or social media.

### RED FLAGS

> You find yourself rationalizing or justifying your behavior. "When you spend time minimizing the consequences of your actions, you're participating in an addictive thought pattern," says Teresi.

> You continue your behavior despite negative consequences. For example, after

you get reprimanded for obsessively Facebooking at work, you just *have* to peek again the second your boss turns her back.

> You spend a disproportionate amount of time on a new behavior. For example, before Twitter entered your life, you used to sleep for a solid eight hours a night. Also, you used to have real friends, not just virtual ones.

> If you don't engage in the behavior, you start to feel anxious. When your anxiety level soars higher than a seven on a scale of one to 10, be especially wary, says Gregory Jantz, Ph.D., founder of The Center for Counseling and Health Resources in Seattle.

### REVERSE THE COURSE

Don't try to quit cold turkey. Doing so may

ignite withdrawal too powerful to ignore. The next time you crave a social media check-in, for example, hold off for 15 minutes. The time after that, wait 30 minutes. Practicing delayed gratification can abort addiction behavior, says Jantz. Or, try doing something else instead. Write up a roster of productive behaviors (socializing, exercising, meditating) to turn to when you feel the itch. And recruit a (very honest) friend whom you can call when temptation strikes. Even a 60-second phone call can distract you from unhealthy compulsions.

—Caitlin Carlson

*All of the other substance and behavioral addictions mentioned in this story should be diagnosed and treated by a medical professional.*