Cue exposure system using Virtual Reality for nicotine craving

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Abstract

Research has shown that many smokers experience an increase in the desire to smoke when exposed to smoking related cues. Cue exposure treatment (CET) refers to the manualized, repeated exposure to smoking related cues, aimed at the reducing cue reactivity by extinction. In this study, we constructed a virtual reality system for evoking a desire of nicotine, which was based on the results of a Questionnaire of Nicotine craving. And we investigated the effectiveness of the virtual reality system as compared to classical device (pictures). As a result, we reached the conclusion that virtual reality elicits more craving symptoms than the classical devices.

Keywords: Cue exposure, Virtual Reality (VR), Nicotine craving, Cue exposure therapy (CET)
1. Introduction

"Craving" is a term derived from popular psychology, and is used to describe a mental state, namely, the intense desire for a certain object or experience (e.g., alcohol, nicotine, or drug) [11]. The World Health Organization in 1955 made a distinction between nonsymbolic craving (i.e., physiological withdrawal) and symbolic craving (i.e., loss of control, which is associated with relapse). It has been suggested that the term 'craving' should be replaced by the terms 'physical dependence' and 'pathological desire', which refer respectively, to the two conditions described above [12-14].

Research has shown that many smokers experience an increase in the desire to smoke when exposed to smoking-related cues [15,16]. A strong desire to smoke, in turn, seems to play an important role in the maintenance of cigarette smoking [15,16]. According to learning-based theories, cue-induced craving might partly reflect a conditioned response (CRD) established by a learned association between the cue (CS) and nicotine intake (US) [17,18]. Cue exposure techniques, which try to extinguish this learned association, have been increasingly forwarded as a potential treatment of addictive behaviors, including cigarette smoking [15,18].

Conditioned reactivity to cues is an important factor in the addiction to alcohol, nicotine, opiate, and cocaine. Cue exposure treatment (CET) refers to the mentalized, repeated exposure to drug-related cues, aimed at reduction cue reactivity by extinction. In current CET, various stimuli are presented, such as slides, video tapes, pictures, or paraphernalia in nonrealistic, experimental settings [9].

Virtual Reality can make a person look, feel, hear and interact in a computer-generated situation. One pilot study on addiction to cocaine showed that immersive virtual reality (IVR) is as good or even better at eliciting subjective and physiological craving symptoms than classical devices [9].

In this study, we designed a virtual reality system to create desire for nicotine, which was based the responses from a nicotine-craving questionnaire. The virtual environment is composed of craving environments, craving objects and smoking avatars. We compared this virtual reality system to Place, and investigated the potential value of the use of a virtual reality system for cue exposure treatment (CET).

2. Preliminary study

2.1 Nicotine Craving Questionnaire

Before we design the virtual environment for eliciting a smoking desire, we collected data about which cue would elicits one’s craving by using a questionnaire (See Table 1).

Table 1 Questions

<table>
<thead>
<tr>
<th>Section</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 1</td>
<td>Tendency of smoking.</td>
</tr>
<tr>
<td></td>
<td>Amount of smoking.</td>
</tr>
<tr>
<td></td>
<td>Whether or not the subject had attempted to quit smoking.</td>
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<tr>
<td>Section 2</td>
<td>Which object does induce your craving?</td>
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<tr>
<td></td>
<td>Which place (or situation) does induce your craving?</td>
</tr>
<tr>
<td></td>
<td>Which is more attractive between the object and place?</td>
</tr>
<tr>
<td>Section 3</td>
<td>Nicotine Addiction Test (Only used on experiment subjects).</td>
</tr>
<tr>
<td></td>
<td>Nicotine dependence: low, moderate, very high.</td>
</tr>
</tbody>
</table>

2-2 Questionnaire Result

Data were collected from 64 men, aged 19 to 38 years. The result showed that a place...
evokes a higher level of craving than an object, bars and tobacco were the places and objects most often cited by participants (See Figure 1, 2 and 3).

3. Main Experiment

3-1 Subject

22 male smokers participated in this experiment. All subjects were free from brain injury, glycosuria, high blood pressure or medicinal poisoning, and were not handicapped in mentally or neurologically. The average of amount of smoking per day was 12.64, and the average nicotine addiction test score was 4.14.

3-2 Instrument

a. System

The Virtual Reality System consisted of a Pentium IV PC, OpenGL Accelerator VGA Card, HMD (i-visor DH-4400VPD), and a 3DOF Position Sensor (Intertax2). The PC with a 3D Accelerator VGA Card generated real-time virtual images for the subject to navigate. The position sensor (tracker) transferred a subject's head orientation to the computer.

b. Virtual Environment

The Virtual Environment was designed based on the nicotine-craving questionnaire. The background environment present here is a bar, the 5 kinds of objects were an

![Figure 1: Which one is more likely to elicit craving—the object or the place?](image1)

![Figure 2: What place is induces of craving?](image2)

![Figure 3: Which objects induces craving most?](image3)

![Figure 4: System Composition Diagram](image4)
alcoholic drink, a pack of cigarettes, a lighter, an ashtray, and a glass of beer and avatars smoking cigarette (See Fig. 5 and 6).

Fig. 5 Virtual bar & Craving Object

Fig. 6 Avatar animation in the virtual bar

c. Classical Device (Picture)

Classical Device (CD) was also based on a questionnaire of nicotine-craving. Therefore the CD’s background was bar, with the same 5 object types, an alcoholic drink, a pack of cigarettes, a lighter, an ashtray, and a glass of beer. CD contained the same content as the VE.

3-3 Procedure

Before the experiment subjects were asked for their ages, educational backgrounds and medical history, to complete a questionnaire on nicotine-craving (a mount of smoking per day and nicotine craving of individual person), and to complete a Nicotine Addiction Questionnaire (from 0 to 11) and a Questionnaire on Current Nicotine craving. For the main experiment, the subjects were split into two groups randomly, a Virtual Reality (VR) group and a Classical Device (Picture) group and subjects were experience the VR and CD respectively for 5 min.

3-4 Measurement

A Visual Analogue Scale (VAS) was used to subjectively measure the craving to smoke. This VAS was defined to have a range of 0-100 mm, from ‘none at all’ to ‘extreme,’ and individual rating was decided by subjects in response to the question: How strong is your urge to smoke now?

4. Result

Table 2 shows Mean (M), Standard Deviation (SD) and t-test result, nicotine addiction test score and the difference of nicotine craving between before and after experiment in both the CD group and the VR group. And it shows also the group difference, which means that the subjects of the two groups are no different in terms of group. But the difference of nicotine craving (After-Before) was significantly different.

Table 2 Compare of CD Group and VR Group

<table>
<thead>
<tr>
<th></th>
<th>Group</th>
<th>CD</th>
<th>VR</th>
<th>t-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td></td>
</tr>
<tr>
<td>Amount of smoking per day</td>
<td>13.17</td>
<td>4.38</td>
<td>12.2</td>
<td>0.85</td>
</tr>
<tr>
<td>Nicotine Addiction Test</td>
<td>3.35</td>
<td>2.06</td>
<td>3.9</td>
<td>0.53</td>
</tr>
<tr>
<td>Usual Nicotine craving</td>
<td>6.88</td>
<td>2.29</td>
<td>6.4</td>
<td>0.77</td>
</tr>
<tr>
<td>Current Nicotine craving before experiment</td>
<td>5.87</td>
<td>2.81</td>
<td>5.4</td>
<td>1.35</td>
</tr>
<tr>
<td>Current Nicotine craving after experiment</td>
<td>5.96</td>
<td>2.97</td>
<td>6.4</td>
<td>1.15</td>
</tr>
<tr>
<td>The difference of Nicotine craving between before and after experiment</td>
<td>0.58</td>
<td>1.92</td>
<td>1.0</td>
<td>1.25</td>
</tr>
</tbody>
</table>

CD=Classical Device (Picture), VR=Virtual Reality, M=Mean, SD=Standard Deviation

Figure 7 shows craving change before and after the experiment for the Classical Device (Picture) group and the Virtual Reality group.
5. Discussion

In the present study, we tried to determine whether virtual reality can be used in cases of nicotine craving as a cue exposure treatment tool. Therefore, we compared a virtual reality system with a classical device (Picture), and measured difference of nicotine craving using VAS.

We found that virtual reality is better at eliciting than classical device (Picture) for CET. This result is accord with the results of KUNTZE’s pilot test for opioid dependent subjects [8]. It is because a VR can present a spatial stimulus, which resembles that of the real world and the VR is more immersive than Classical CET device.

As a result, the nicotine craving of the VR group increased significantly from 5.40 to 6.40. However, the CD group’s nicotine craving only showed a tendency to decrease from 5.67 to 5.08. This result shows that the picture showing is not as suitable a device for eliciting nicotine craving in normal subject. Additional experimentation in 8 subjects reconfirned that the observed CD group’s decrease was non-significant. Nicotine craving, including of additional experiment, is changed from 5.50(before exp.) to 5.45(after exp.).

The future study is needed to investigate whether VR is superior to other classical methods at evoking nicotine craving other sources of objective evidence by acquiring and analyzing objective evidence such as, bio signals (Heart Rate, Galvanic Skin Response), fMRI (functional Magnetic Resonance Imaging) or PET (Positron emission tomography) and the possibility of a VR system for the other types of abuse and to apply the VR system to treat such abuse.

6. Conclusion

Our study demonstrates that virtual reality is probably better at eliciting craving symptoms than classical picture watching and we propose that Virtual Reality be used in Cue exposure Therapy.

Acknowledgement

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7. Reference


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