

# The Hazard of Internet Addiction: A Warning Message from the 2014 Metro Attack in Taiwan

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The children with attention deficit hyperactivity disorder (ADHD) and co-occurring Conduct Disorder (CD) are predisposed to juvenile delinquency (Cohn et al., 2012; Mannuzza, Klein & Moulton, 2008), but none of previous reports have ever linked juvenile delinquency to internet addiction (IA). Internet addiction is defined as excessively using computer, communication, and consumer (3C) electronic product even appear withdrawal syndrome if such internet addicted behavior being stopped. IA recently has become quite common among adolescents. The published prevalence rates have ranged from 4-6% (Wartberg, Thomsen, Moll & Thomasius, 2014) in Germany to 13.5% (Wu et al., 2013) in China. Indeed, playing computer game, even on line, is not necessary to become IA. But quite of lot of adolescent is not only becoming impaired in their academic or daily life function also they developed as addiction problem. That is why now in newly published DSM-5, IA has been temporarily placed in section III of the and named Internet Gaming Disorder (IGD) (Reinhardt & Reinhardt, 2013). Herein, we report a case of mass stabbing can be used to explain the possible pathogenesis after long term IA and further suggest IA may have significant relationship with such destructive adolescent criminality.

A 21-year-old male college student perpetrated a mass stabbing in the Taipei metro subway on May 21, 2014. The family and friends never noticed that he had any signs of homicidal aggression because he lived in a school dormitory, where he spent much time on computer games that featured killing content. Despite having a history of threatening or planning to kill his teacher on several occasions and one time having quit school, his parents claimed he was a sedentary and homebound boy who had an excessive love of playing computer games. One month before the mass stabbing, he was counseled by a teacher because he told his friend he had a plan to kill people. Not till the school counselor planned to help him did he finally bring two knives with him to kill 4 people and injure many others on a subway train.

This perpetrator was diagnosed after forensic psychiatric evaluation as having antisocial personality disorder (ASPD). ASPD itself has been clearly linked with criminality and ADHD plus CD. But this adolescent with ASPD had no prior psychiatric evaluation to being diagnose as ADHD and CD before. It seems difficult to discuss these 2 diagnoses for this patient, but we all agree that only children with ADHD and CD have been reported to be predisposed to juvenile delinquency which is associated with antisocial personality disorder (ASPD) (Storebo & Simonsen, 2013). Therefore, ADHD plus CD diagnosis should be warranted earlier before his developing to ASPD.

According to the present fact on the surface, here we suggest that modern antisocial personality is formed not just rely on past adverse

family risk, e.g. harsh parenting, inconsistent discipline, father with ASPD and alcoholism (Kuperman, Schlosser, Lidral & Reich, 1999; von Polier, Vloet & Herpertz-Dahlmann, 2012). Internet addiction may be a new risk to affect the minds of young children leading them to commit violent and destructive criminality. As a result, new family adversity is their busy family and school teacher's permitting their children indulge in an IA world since their early younger age and careless on noticing their children's possible development of aggressive hostility in character as this juvenile criminality case finally.

From this antisocial personality patient, we suggest to link excessive computer on line violent gaming with criminal behavior (Hollingdale & Greitemeyer, 2014). Therefore, relevant expertise need to pay attention to an lonely homebound sedentary adolescent plays computer games being full of violent killing content excessively, with irregular meal or malnutrition (Kim et al., 2010), or irregular sleep due to his IA problem. Cause such adolescent may have risk of murderous behavior if they had unrecognized ASPD, ADHD, and CD problem.

The implication of this case report is that child psychiatrists should conduct earlier screening for neurodevelopmental disorders, e.g. ADHD among adolescents with internet gaming disorder, especially for those adolescents with a history of aggression, quitting school, social isolation, irregular meals, and irregular sleep patterns. More clinical reports of juvenile criminality in future would be highly recommended.

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