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addictions as primary disorders ('Risk Hypothesis'). Finally, IGD appeared to compromise psychological health slightly more in comparison to SNS addiction. *Conclusions:* Overall, it can be concluded that different types of behavioral addictions can share common etiology. Additionally, empirical evidence supporting the role of behavioral addictions as primary disorders capable of potentiating further psychiatric comorbidity was found, thus supporting the 'Risk Hypothesis' for behavioral addictions.

OP-147

An empirical analysis of the nine Internet Gaming Disorder criteria

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Background and Aims: Internet Gaming Disorder (IGD) has received increased scientific attention since May 2013, and its assessment can be conducted using the nine criteria suggested by American Psychiatric Association (APA). This study examined the role of each IGD criterion using a conditional inference tree model. *Methods:* A total of 3,377 gamers (82.7% male, mean age 20 years, SD = 4.3 years) were recruited to the present study. In addition to collecting sociodemographic information, participants filled out the Internet Gaming Disorder Scale–Short-Form (IGDS9-SF) based on the DSM-5 criteria. *Results:* The conditional inference tree model revealed that endorsement of 'withdrawal' (criterion 2) and 'loss of control' (criterion 4) increased the likelihood of IGD by 77.77% (95%CI: 62.09–93.45) while endorsing 'withdrawal', 'loss of control' and 'negative consequences' (criterion 9) increased the likelihood of IGD by 26.66% (95%CI: 4.28–49.04). Finally, not endorsing 'withdrawal' but endorsing 'preoccupation' (criterion 1) increased the probability of IGD by 7.14% (95%CI: 1.63–12.65). *Conclusions:* Overall, these results suggest that not all IGD criteria carry the same diagnostic weight as each criterion can play a different role in the development of IGD. It is envisaged that these findings will help improve the assessment of IGD in the future.

OP-148

A rose by any other name? Classification issues surrounding compulsive sexual behavior for ICD-11

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Background and aims: Hypersexual disorder was considered for but excluded from DSM-5. Compulsive sexual behavior disorder is currently being considered for inclusion in ICD-11. Differing views exist as to whether compulsive sexual behavior disorder is a genuine entity