

# The Impact of Addiction on The Brain's Reward Circuitry, And How This Affects the Motivation and Decision-Making Processes: A Review

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Addiction is defined as a chronic neurobiological disorder marked by significant alterations in brain structure and function, leading to compulsive behaviors despite negative consequences. This literature review examines addiction through a neurobiological and psychological lens, focusing on how it progresses through distinct stages: experimentation, regular use, dependence, and addiction. The reviewed studies were selected based on predefined criteria, including relevance to neurobiological mechanisms and psychological motivations, using databases such as PubMed, Google Scholar and PsycINFO. A PRISMA-guided approach was followed to ensure methodological rigor and transparency in literature selection. Central to this discussion is the role of dopamine within the brain's reward system, which reinforces behaviors associated with pleasure. Dysregulation of this circuitry results in heightened cravings, impaired decision-making, and emotional dysregulation, complicating recovery efforts. The key findings highlighted the necessity of addressing cognitive impairments, such as impulsivity and poor decision-making, and the significant influence of both pleasure-seeking and nurturant motives in addiction progression. Additionally, the research underscored the importance of targeted interventions that address these neurobiological disruptions and psychological drivers. Ultimately, this paper advocates for a comprehensive approach that integrates neurobiological insights with psychological motivations to effectively support individuals struggling with addiction. The findings provide actionable insights into tailoring recovery interventions and bridging the gap between biological mechanisms and behavioral therapies.

**Keywords:** Addiction, Brain reward circuitry system, Motivation, Decision-making processes

## Introduction

Addiction is a chronic neurobiological disease characterized by dramatic changes in brain function related to an individual's behaviors<sup>1</sup>. The term "addiction" is often applied broadly to the point of misuse. Many people casually refer to themselves as "addicted" to various things, such as sugar, plastic surgery, shopping, laziness, or even the modern concept of 'screen addiction'<sup>1</sup>. In truth, many of these individuals are not genuinely addicted; instead, they might be displaying specific personality traits like habits or weak tendencies, which could contribute to difficulties in decision-making<sup>1</sup>.

Addictive behaviors can be categorized into hedonistic (pleasure-seeking) motives (such as drug use, gambling, or sexual activities) or nurturant motives (like shopping, love, or exercise)<sup>2</sup>. Many individuals struggling with addiction may be driven by a desire for social status within certain peer groups or a longing for oblivion to escape the pain of their realities. Regardless of the specific behavior, all forms of addiction share the capacity to significantly alter an individual's subjective experience of self, leading to profound changes in behavior and identity over time due to some changes in the brain<sup>2</sup>.

The exploration of the brain circuits responsible for gener-

ating feelings of reward or pleasure is valuable to understand the effect of addiction on addicts' brains, helping researchers understand how addicts feel and think. This opens avenues to make it easier to provide support, develop personalized treatments, and help addicts achieve recovery<sup>1</sup>. The brain reward circuit is a complex system that influences responses to survival-related activities like food, sex, and social interaction.<sup>12</sup> The mediation of reward is taken care of by the mesocorticolimbic dopamine pathway: the ventral tegmental area (VTA) and the nucleus accumbens (NAc)<sup>3</sup>. The VTA contains dopaminergic neurons projecting to the prefrontal cortex and NAc. The prefrontal cortex is engaged with seeking rewards while the NAc handles the processing of rewards within the brain<sup>3</sup>.

Dopamine is a key neurotransmitter that modulates neuronal activity, reinforces learning, and contributes to both motivation and adaptive reward processes. Dopamine also plays a role in addiction by dysfunctional learning and heightened motivation<sup>4-8</sup>. Most abused drugs activate the brain's reward circuits, leading to initial voluntary drug experimentation. After this initial period of voluntary experimentation, continued use impairs self-control and increases sensitivity to stress and negative moods.<sup>3</sup> While the immediate effects and withdrawal symptoms differ among various addictive substances, all drugs of

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abuse influence the brain's reward system and the extracellular levels of dopamine involved, affecting the motivation and decision-making process for the individual<sup>4</sup>. Individuals with substance use disorders demonstrate notable impairments in cognitive functions essential for complex decision-making — including reduced risk sensitivity and motivation — as well as difficulties in self-regulation and cognitive inhibition<sup>5</sup>.

In this paper, the impact of addiction on the brain's reward circuitry system will be investigated through a literature review by quantifying the relationship between the changes addiction causes in the reward system and the motivation and decision-making processes of addicted people. Specifically, this study aims to explore how chronic addiction leads to significant alterations in the brain's reward circuitry, hypothesizing that addicts become less interested in normal pleasures and more drawn to stimuli related to their addiction. This research will involve an analysis of current literature focusing on the changes in the reward system and their influence on motivation and decision-making. The findings could be applied to rehabilitation programs, public health initiatives, and policy-making efforts to enhance recovery outcomes and promote healthier decision-making among individuals affected by addiction.

## Methodology

This research paper examines the impact of addiction on the brain's reward circuitry and its effects on motivation and decision-making processes. The methodology involves a comprehensive and systematic integration of scholarly literature published within the last decade. The review focused on articles assessing the neurobiological underpinnings and behavioral consequences of addictive behaviors.

The literature review according to the PRIMA protocol was conducted using specific search criteria to identify relevant studies. Peer-reviewed articles were selected from databases such as PubMed, PsycINFO, and Google Scholar. The inclusion criteria included studies published between 2014 and 2024 that explicitly investigated the impact of addiction on the dopamine pathway, its role in motivation and decision-making, and its effect on brain circuitry related to reward. Exclusion criteria eliminated studies with insufficient focus on these neurobiological mechanisms or those that lacked empirical evidence.

Key findings related to reward circuitry, impulsive behavior, and the characteristics of substance use disorders were summarized, highlighting the consequences of altered neurotransmitter pathways for behavior and decision-making.

As mentioned in (Nutt, et al. 2018.), addiction is defined as a complex condition characterized by compulsive drug seeking and use despite harmful consequences, affecting not only substances but also behaviors like gambling. The authors explore the neurobiological mechanisms behind addiction, including the role of neurotransmitters like dopamine, and emphasize the

interplay of psychological, social, and biological factors in its development.

According to (Volkow, et al. 2015.) addiction makes changes in the brain reward system, particularly the mesolimbic dopamine pathway, which plays a crucial role in reinforcing behaviors essential for survival by responding to natural rewards like food and sex, as well as drugs of abuse. Chronic drug use can lead to neuroadaptations that impair the brain's response to natural rewards and alter decision-making processes, resulting in compulsive drug-seeking behavior despite negative consequences.

As noted in (Guirado, et al. 2020.) paper, The prefrontal cortex (PFC) is essential for decision-making, impulse control, emotional regulation, and social behavior, with disruptions in these functions linked to psychiatric disorders and addiction. Critical periods in PFC development are vital for establishing neural circuits, and adverse early life experiences can lead to long-lasting changes in PFC function, increasing vulnerability to mental health issues due to alterations in neurotransmitter systems and neuroinflammation.

This structured approach ensures that the review comprehensively addresses the multifaceted nature of addiction and provides a clear understanding of its neurobiological and behavioral dimensions

## Addiction

Addiction is a chronic neurobiological disease characterized by pronounced changes in brain structure and function related to behaviors. Addictive disorders develop when individuals continue to use substances or engage in rewarding behavior despite adverse consequences. Many people believe they are addicted to a range of things, including sugar, cosmetic procedures, shopping, laziness, or even screen addiction. In fact, most of the individuals who come under this category are not really addicted; they may reflect some personality traits, such as habits or fragile personalities, that may indicate disorders in the decision-making process, except in cases where such activities interfere with their normal lives then they could be called addicts<sup>1</sup>.

Addiction makes it difficult to carry on life routines. It affects relationships, fulfilling work and school responsibilities, and self-care<sup>9</sup>. Individuals feel mood swings, increased anxiety, and depression that hinder their ability to participate in everyday functions and reduce their outlook toward life<sup>9,10</sup>. Addiction socially affects the relationships of addicts with their family, friends, and coworkers, which often leads to loneliness as using substances that they're addicted to becomes more important than being with people. Addiction may lead to serious money problems, a lot of legal issues, and job loss, all of which simply worsen stress. There are important health concerns too since addiction can cause a wide variety of physical and mental problems that make the life of addicts harder. Secondly, people may

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resort to unhealthy coping mechanisms for the stress caused by the addiction itself, further reinforcing the substance use cycle and making recovery harder<sup>9</sup>.

The stages of addiction can be understood as a progression through several phases. Initially, individuals may experiment with substances, often driven by curiosity or social influences. The progression from experimentation with a substance to potential addiction is a complex interplay of physiological and psychological factors. Initially, an individual may incorporate the substance into their routine, often for reasons such as social acceptance or self-medication. As use continues, the body adapts, leading to tolerance, where the individual requires increasingly larger doses to achieve the same effects. This adaptation is not merely a physical response; it reflects significant neurochemical changes in the brain, including disruptions in the dopamine and serotonin systems. Dopamine, often referred to as the "reward neurotransmitter," becomes dysregulated, leading to diminished natural reward mechanisms and reduced pleasure from everyday activities. Simultaneously, serotonin, which is critical for mood regulation, can also be altered, contributing to increased anxiety, depression, and emotional instability. Consequently, this can lead to dependence, characterized by withdrawal symptoms when the substance is not available, creating a cycle where the user feels compelled to continue using the substance to avoid discomfort. Ultimately, addiction manifests as a chronic condition marked by compulsive behavior and a loss of control over substance use, despite awareness of its adverse consequences. This transition underscores the intricate relationship between tolerance, dependence, and addiction—each stage feeding into the next and complicating recovery efforts<sup>11</sup>.

Addictive behaviors can be categorized into hedonistic (pleasure-seeking) motives (such as drug use, gambling, or sexual activities) or nurturant motives (like shopping, love, or exercise). Pleasure-seeking motives are common addictive behaviors as they include drug use, sexual activities, and screen addiction. Smartphones have become essential to daily life, providing numerous gratifications such as sociability, entertainment, information finding, time management, coping strategies, and social identity maintenance<sup>2</sup>. However, the smartphone's popularity and users' deep connection have awoken concerns about its addiction potential, with screening studies estimating smartphone addiction ranging from just above 0% to 35%<sup>12</sup>.

Drug use is also one of the hedonistic (pleasure-seeking) motives, the most common drugs of addiction are tobacco, alcohol, cocaine, and heroin.<sup>7</sup> Drug distribution spans all social classes and primarily occurs through in-person exchanges in various settings, such as clubs and neighborhoods<sup>13</sup>. However, advancements in technology have facilitated a shift towards online platforms, where tools like TOR and cryptocurrencies like Bitcoin enable anonymous drug purchases, significantly increasing access to illegal substances<sup>13</sup>. Certain situations raise the demand of individuals to addiction strongly directed towards

utilizing the drug, and that concern: places that promote use; being in the company of somebody who consumes drugs, finding oneself to be very or slightly anxious, stressed or frustrated because of the think of "everything in my life is going wrong"<sup>14</sup>.

Another pleasure-seeking motive is sexual behavior disorder. The late 1990s saw increased interest in sexual activity among general population demographic, particularly due to the internet's role in facilitating these behaviors, leading to the proposal of Hypersexual Disorder for the DSM-5, which was ultimately excluded due to diagnostic concerns. The subsequent inclusion of Compulsive Sexual Behavior Disorder (CSBD) in the ICD-11 has reignited debates over the classification of such behaviors<sup>15</sup>.

The second type of addictive behavior is the nurturant motives - natural desire to care for and support others. This includes such feelings as empathy, compassion, and even responsibility regarding the feelings of others. Research indicates that those with strong nurturant motives may use drugs or alcohol as a self-destructive coping mechanism due to the stress associated with caregiving for others in addition to their own emotional struggles. Such addiction may prevent those affected by addiction from carrying out nurturance roles and hence lead to avoidance of duties and interpersonal problems; this, in turn, distresses those affected by addiction as well as their dependents<sup>16</sup>. Whatever the specific behavior involved, it is true that all addictions greatly alter how a person feels about themselves. This results in significant alterations in their behavior and identity over time due to changes occurring in certain areas of the brain<sup>2</sup>.

## The Brain's Reward Circuitry: Structure and Function

Investigating the brain circuits that produce feelings of reward or pleasure is crucial for comprehending the impact of addiction on our brains. The brain's reward circuit is a sophisticated network that affects how we respond to essential activities related to survival, including eating, sexual activity, and social engagement<sup>17</sup>. The brain's reward system is a complex network with various regions involved, each having a specific role in processing rewards, motivation, and addiction. The brain reward circuitry system consists of the Nucleus Accumbens (NAc), ventral Tegmental Area (VTA), Prefrontal Cortex (PFC), amygdala, Dopaminergic Pathways, and hippocampus. Understanding the function of each region is essential to understanding how rewards impact behavior and how addiction might disrupt such processes<sup>18</sup>.

The Nucleus Accumbens (NAc) is a crucial brain structure implicated in rewards and experiential learning. It mainly consists of two subcomponents: the core and the shell. The NAc core is more integrated with the processing of reward information while the shell is related to the motivational features of reward. Dysregulation in the functioning of the NAc has been implicated in mood disorders such as depression and substance abuse<sup>18</sup>.

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The ventral tegmental area (VTA) is a cluster of neurons located in the midbrain, primarily known for its role in dopamine production. VTA is a crucial component of the brain's reward system, sending dopaminergic projections to various regions, including the NAc. This activation is essential for the experience of pleasure and reward<sup>18</sup>.

The prefrontal cortex (PFC) plays a crucial role in higher-order cognitive functions such as decision-making, impulse control, and planning. PFC regulates the brain's reward circuitry by modulating responses to rewards and facilitating the ability to delay gratification. However, in individuals struggling with addiction, the functioning of the PFC can become impaired, resulting in poor decision-making and heightened impulsivity, which can further exacerbate substance use behaviors<sup>18</sup>.

The amygdala plays a crucial role in emotional processing and the formation of emotional memories, influencing our responses to rewarding stimuli and motivating us to seek out rewards based on past experiences. The amygdala's connection to addiction is significant, as the amygdala enhances the emotional significance of drug-related cues, which can lead to cravings and relapse in individuals with substance use disorders<sup>18</sup>.

The hippocampus plays a vital role in memory formation and spatial navigation, enabling the encoding and retrieval of memories linked to rewards and experiences. In the context of addiction, it significantly influences how individuals perceive and remember the contexts in which they experienced pleasurable substances, ultimately affecting their desire to seek out these substances again<sup>18</sup>.

The dopaminergic pathways play a crucial role in the brain's reward and cognitive processes<sup>18</sup>. It consists of the mesolimbic pathway and the mesocortical pathway. The mesolimbic pathway connects the VTA to the NAc and is primarily involved in reward and reinforcement, making it a key player in the effects of addictive substances. In contrast, the mesocortical pathway links the VTA to the PFC, contributing to cognitive functions and reward decision-making. Together, these pathways highlight the intricate relationship between dopamine, motivation, and behavior<sup>18</sup>.

## The impact of addiction on the brain's reward circuitry system

Dopamine is the primary neurotransmitter in the brain reward system in signaling the presence of reward and reinforcing specific behavior that generates reward. Dopaminergic neurons are sensitive not only to real rewards but also to various signals that predict the appearance of such rewards, underlining their crucially important role in the processes of learning and motivation. The most significant areas of the brain, in which dopamine exerts an influence on the processing and experiencing of rewards, are the ventral tegmental area (VTA) and the nucleus accumbens

(NAc). For instance, studies have shown that cocaine use causes an excessive release of dopamine in the NAc, producing intense euphoria. This disrupts normal reward signaling by overstimulating the dopaminergic system, leading to the prioritization of drug-related rewards over natural rewards like food and social interactions. Impaired dopamine function could result in excessive release of this neurotransmitter along with the loss of sensitivity to its effects. This combination significantly contributes to persistent drug-seeking behaviors and strong desires individuals may experience as a result of addiction<sup>3</sup>.

Dopamine is released in response to rewarding stimuli, signaling pleasure and promoting behaviors that lead to these rewards. However, addictive substances can significantly disrupt this circuitry by causing an excessive release of dopamine, leading to intense euphoria and reinforcing drug use over natural rewards such as food or social interactions. With repeated use, the brain becomes desensitized, requiring larger quantities of the substance to achieve the same effect, while altering reward processing such that natural rewards become less pleasurable. This dysfunction in the prefrontal cortex (PFC) impairs decision-making and impulse control, contributing to compulsive drug-seeking behavior, even in the face of negative consequences. The long-term changes in the brain's reward circuitry can persist after interruption of drug use, increasing the risk of relapse and complicating recovery due to emotional dysregulation, anxiety, and depression<sup>4</sup>.

The impact of drugs on the reward system is a key factor in the development of addiction. With repeated drug use, the brain undergoes neuroadaptive changes, including desensitization of dopamine receptors and altered reward processing, leading to increased consumption and compulsive drug-seeking behavior. Chronic exposure to drugs can also impair decision-making, emotional regulation, and motivation, further driving the cycle of addiction. The long-lasting neurobiological changes associated with addiction heighten the risk of relapse, as the brain remains sensitive to drug-related cues<sup>5</sup>.

The prefrontal cortex (PFC) plays a crucial role in addiction, as it is responsible for higher-order cognitive functions such as decision-making, impulse control, and emotional regulation. Drug addiction disrupts the normal functioning of the PFC, leading to impaired decision-making, increased impulsivity, and compulsive drug-seeking behavior.

Comparative studies across species, including rodents, non-human primates, and humans, have provided specific insights into the neurobiological mechanisms of addiction. For example, rodent studies have demonstrated that chronic drug use alters dopamine signaling in the PFC, impairing inhibitory control. Non-human primate research has highlighted structural changes in the PFC, such as reduced gray matter volume, which correlate with diminished executive functioning. Human imaging studies have identified disrupted connectivity between the PFC and brain regions involved in reward processing, such as the striatum,

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contributing to the loss of control over drug-seeking behavior.

These studies collectively reveal how addiction-induced PFC dysfunction results in cognitive deficits that hinder an individual's ability to evaluate risks and consequences, making it difficult to resist the urge to use drugs. Importantly, research has also shown that the PFC has the capacity for neuroplasticity, which refers to the brain's ability to reorganize and form new neural connections in response to experiences or injury. In the context of addiction, neuroplasticity plays a crucial role, as the brain adapts to prolonged drug exposure by strengthening maladaptive neural pathways associated with drug-seeking behavior while weakening those related to self-regulation and control.

Interventions such as behavioral therapies have been found to enhance PFC-mediated self-regulation, while pharmacological treatments targeting dopamine and glutamate systems can improve decision-making and impulse control. Each of these studies contributes uniquely to the overall understanding of how PFC dysfunction underlies addiction and offers avenues for therapeutic strategies<sup>6</sup>.

## How motivation and decision-making processes get affected (Results)

Addiction significantly impairs decision-making abilities, leading individuals to make poor choices regarding drug use despite experiencing negative consequences. This impairment is primarily associated with dysfunction in brain regions responsible for executive functions, particularly the prefrontal cortex (PFC). Behavioral economic models illustrate how individuals with addiction often prioritize immediate rewards over delayed benefits, a phenomenon known as "delay discounting". Neurobiological models further explain this behavior by examining alterations in the brain's reward circuitry, emphasizing the roles of dopamine and other neurotransmitters in decision-making processes related to reward and risk. Additionally, cognitive factors such as risk assessment and impulse control, along with emotional influences like cravings and stress, exacerbate the decision-making challenges faced by those with addiction. Contextual factors, including environmental cues and social influences, also play a crucial role in shaping decisionmaking in addiction, highlighting the importance of understanding these elements for developing effective interventions<sup>7</sup>.

Impaired decision-making can lead to maladaptive choices, such as continued substance use despite negative consequences. In the early stages of addiction, individuals may exhibit impulsive decision-making characterized by a preference for immediate rewards (e.g., drug use) over delayed consequences (e.g., health issues, legal problems). As addiction progresses, decision-making becomes more dysfunctional, with increased difficulty in evaluating risks and benefits, leading to poor judgment and a lack of consideration for long-term consequences. In

the later stages, decision-making may become severely compromised, with individuals engaging in compulsive drug-seeking behavior and prioritizing substance use above all else<sup>8</sup>.

Addiction is fundamentally characterized by impaired decision-making, where individuals often prioritize immediate rewards, such as substance use, over long-term consequences like health issues and social problems. The prefrontal cortex (PFC) plays a crucial role in evaluating these options and regulating behavior; however, its functioning can be significantly altered in those with addiction. The concept of "critical periods" is essential, as these are specific developmental windows when the PFC and its connections (the amygdala, striatum, and hippocampus) are particularly sensitive to environmental influences. During these periods, critical processes such as synaptic pruning and the strengthening of neural circuits occur. Disruptions during these periods can lead to maladaptive decision-making patterns, increasing vulnerability to psychiatric disorders and addiction later in life. Furthermore, the configurations of neural networks within the PFC can influence behavior, with changes in connectivity between the PFC and regions like the limbic system affecting emotional responses and decision-making. In addiction, altered PFC network configurations may diminish impulse control and heighten the focus on immediate rewards<sup>19</sup>.

## Discussion

This paper aims to investigate the effect of addiction on the brain reward circuitry system and discover if that impact affects the decision-making processes and motivation of addicts or not. This may be used by researchers and doctors to understand the effects of addiction and may help them develop new ways to treat addicts. I reviewed various pre-reviewed research papers on these topics: addiction, brain reward circuitry system, the effect of addiction on the brain reward circuitry system, and the effect of addiction on motivation and decision-making processes. The results of this study show that addiction results in significant changes in the brain reward circuitry system affecting the motivation and decision-making processes of addicts.

Chronic disease addiction arises from a mix of environmental and developmental influences that alter brain structure and function. The defining feature of addiction is compulsive behavior, where individuals continue substance use despite experiencing negative consequences. The progression of addiction typically follows several stages: it begins with experimentation, moves to regular use, then to tolerance, dependence, and ultimately culminates in developed addiction. This condition significantly disrupts daily life, affecting personal relationships, work performance, and self-care. It can lead to various psychological issues such as mood swings, anxiety, and depression, as well as financial difficulties and serious health complications due to changes in the brain's reward circuitry system.

The brain regions typically impacted by addiction include

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the nucleus accumbens (NAc), prefrontal cortex (PFC), amygdala, and hippocampus. The nucleus accumbens (NAc), a key component of the reward circuitry, is critical in processing rewarding stimuli and reinforcing behaviors. Addiction disrupts normal NAc function by altering dopamine, glutamate, and GABA neurotransmitter systems. Dopamine levels, which are usually heightened during reward experiences, are diminished in addiction, reducing the NAc's ability to process rewards, thereby weakening the reinforcement of healthy behaviors.

In the prefrontal cortex (PFC), which is responsible for higher-order cognitive functions such as decision-making and impulse control, addiction reduces connectivity and impairments in glutamate and GABA systems. These changes reduce the PFC's ability to regulate impulsive and compulsive behavior, contributing to the altered decision-making processes seen in addicts.

Dopamine is the primary neurotransmitter in the brain's reward system, reinforcing behaviors that lead to rewards. In addiction, impaired dopamine function results in excessive release and reduced sensitivity, driving compulsive drug-seeking behaviors. Addictive substances can overshadow natural rewards and lead to desensitization, requiring larger doses for the same effect. This dysfunction also affects the prefrontal cortex (PFC), impairing decision-making and impulse control.

Addiction severely disrupts decision-making capabilities, often leading individuals to prioritize immediate rewards, such as drug use, over long-term consequences like health and social issues. This impairment is primarily linked to dysfunction in the prefrontal cortex (PFC), which plays a crucial role in regulating higher-order cognitive functions, including decision-making, impulse control, and risk assessment. However, the degree of impairment can vary widely across individuals. Some individuals may exhibit impulsive decision-making, characterized by a preference for short-term rewards despite long-term consequences, while others may display a more compulsive, loss-of-control type of decision-making, where the inability to resist drug-seeking behavior becomes predominant.

As addiction progresses, decision-making deteriorates further, resulting in compulsive drug-seeking behavior and a diminished ability to evaluate risks and benefits. Contextual factors, including environmental cues and social influences, also shape decision-making processes in addiction. During acute intoxication, there tends to be heightened impulsivity due to reduced PFC activity and increased dopamine release, which amplifies immediate reward-seeking. In contrast, during withdrawal, dysfunction in the PFC persists but may be exacerbated by decreased dopamine levels, further impairing the ability to weigh the long-term consequences, thus promoting compulsive behaviors. These varying degrees of impairment and differing mechanisms highlight the complexity of decision-making deficits in addiction.

This study is consistent with the pieces of evidence in some previous studies<sup>4-6</sup> that discuss the changes that occurred in the

brain reward circuitry system because of addiction, and it's also consistent with the results of other research<sup>5,6</sup> that explains the changes in the decision-making processes and motivation.

The implication of this study is to recommend future studies about addiction and its effects on the brain and decision-making processes. This may help researchers and doctors set priorities for subsequent research efforts and discover new ways to treat addicts.

One significant study is by (Wise, et al. 2014.), which investigates addiction stages. Addiction progresses from initial experimentation with substances, leading to regular use, tolerance development, physical dependence, and ultimately to addiction characterized by compulsive behavior and loss of control despite negative consequences.

Another important study conducted by (Wise, et al. 2021.), focuses on the role of addiction in making changes in the brain reward circuitry system. Dopamine is released in response to rewarding stimuli, promoting pleasure and behaviors that seek these rewards. Addictive substances can disrupt this system by causing excessive dopamine release, leading to euphoria and a preference for drugs over natural rewards. Repeated use results in desensitization of the brain's reward circuitry, impairing decision-making and impulse control, which contributes to compulsive drug-seeking behavior.

Lastly, a study by (Koffarnus, et al. 2018.), which discusses the impairments of addiction. Addiction impairs decision-making by disrupting brain regions like the prefrontal cortex (PFC), leading individuals to prioritize immediate rewards over long-term benefits and making poor choices despite negative consequences, influenced by neurobiological changes, cognitive factors, emotional states, and contextual elements.

Using animal or human models to analyze the data and study the different brain regions in order to understand it more professionally is an important limitation. This could have led to utilizing more accurate results with strong evidence.

Future research should reconfirm these findings by conducting clinical models of addiction to develop new ways to treat addicts and learn how to deal with them. Animal models were used in (Spanagel. 2017.)<sup>20</sup>, the models were categorized into several types, including self-administration models that replicate drug-seeking behavior, conditioned place preference models that evaluate drug reward effects, and withdrawal models that examine the symptoms of dependence, all of which enhance the understanding of the neurobiological mechanisms underlying addiction. In (Glantz. 2019.)<sup>21</sup>, the author reviews various addiction models, including animal and human studies, to highlight their importance in understanding addiction mechanisms and developing potential treatments.

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## Conclusion

Addiction is a complex and multifaceted disorder that profoundly impacts individuals' lives, relationships, and decision-making processes. Characterized by changes in brain structure and function, addiction leads to compulsive behaviors despite adverse consequences. The distinction between true addiction and mere habits is crucial, as many individuals may misidentify their behaviors without recognizing the underlying neurobiological factors at play.

The progression of addiction can be understood through various stages, starting from experimentation to dependence and ultimately to complete addiction. This journey is often influenced by both hedonistic motives, such as substance use and gambling, and nurturant motives, where individuals may resort to substances as a coping mechanism for stress related to caregiving.

The brain's reward circuitry plays a pivotal role in addiction, with neurotransmitters like dopamine being central to the experience of pleasure and reinforcement of behaviors. Dysregulation within this circuitry can lead to heightened cravings, impaired decision-making, and emotional dysregulation, making recovery challenging.

Moreover, the impact of addiction extends beyond the individual, affecting social relationships and leading to significant economic and legal repercussions. Understanding the neurobiological underpinnings of addiction not only illuminates the challenges faced by those affected but also underscores the potential for recovery through targeted interventions that can restore cognitive function and improve decision-making abilities.

In summary, addressing addiction requires a comprehensive approach that considers its neurobiological basis, the psychological motivations behind addictive behaviors, and the social context in which these behaviors occur. By increasing awareness and developing effective treatment strategies, it is possible to mitigate the effects of addiction and support individuals on their path to recovery.

## References

- 1 C. K. Erickson, *The science of addiction: From neurobiology to treatment*, 2018.
- 2 D. J. Nutt and L. J. Nestor, *Addiction*, 2018.
- 3 R. A. Wise and M. A. Robble, *Dopamine and addiction*, 2020.
- 4 R. A. Wise and C. J. Jordan, *Dopamine, behavior, and addiction*, 2021.
- 5 N. D. Volkow and M. Morales, *The brain on drugs: from reward to addiction*, 2015.
- 6 A. O. Ceceli, C. W. Bradberry and R. Z. Goldstein, *The neurobiology of drug addiction: cross-species insights into the dysfunction and recovery of the prefrontal cortex*, 2022.
- 7 M. N. Koffarnus and B. A. Kaplan, *Clinical models of decision making in addiction*, 2018.
- 8 A. Verdejo-Garcia, T. T. J. Chong, J. C. Stout, M. Yücel and E. D. London, *Stages of dysfunctional decision-making in addiction*, 2018.
- 9 J. Billieux, A. Schimmenti, Y. Khazaal, P. Maurage and A. Heeren, *Are we overpathologizing everyday life? A tenable blueprint for behavioral addiction research*, 2015.
- 10 W. H. O. R. O. for the Eastern Mediterranean, *Addiction*, 2019, <https://iris.who.int/handle/10665/352202>.
- 11 R. A. Wise and G. F. Koob, *The development and maintenance of drug addiction*, 2014.
- 12 T. Panova and X. Carbonell, *Is smartphone addiction really an addiction?*, 2018.
- 13 M. Hunt, *Examining general attitudes towards illegal drug use & addiction*, 2018.
- 14 M. A. Nimtz, A. M. F. Tavares, M. A. Maftum, A. C. Z. Ferreira, L. D. O. Borba and F. C. Capistrano, *The impact of drug use on the family relationships of drug addicts*, 2014.
- 15 J. B. Grubbs, K. C. Hoagland, B. N. Lee, J. T. Grant, P. Davison, R. C. Reid and S. W. Kraus, *Sexual addiction 25 years on: A systematic and methodological review of empirical literature and an agenda for future research*, 2020.
- 16 L. Strathearn, C. E. Mertens, L. Mayes, H. Rutherford, P. Rajhans, G. Xu and S. Kim, *Pathways relating the neurobiology of attachment to drug addiction*, 2019.
- 17 B. MacNicol, *The biology of addiction*, 2017.
- 18 S. Cooper, A. J. Robison and M. S. Mazei-Robison, *Reward circuitry in addiction*, 2017.
- 19 R. Guirado, M. Perez-Rando, A. Ferragud, N. Gutierrez-Castellanos, J. Umemori, H. Carceller and E. Castillo-Gómez, *A critical period for prefrontal network configurations underlying psychiatric disorders and addiction*, 2020.
- 20 R. Spanagel, *Animal models of addiction*, 2017.
- 21 M. D. Glantz, *Addiction Models and the Challenge of Having Impact*, 2019.