




**DSM-V**



# Agenda slide

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1. Introduction
  2. DSM V
  3. Assessment tool in manual
  4. Ethics
  5. Q&A
- 

# Overview

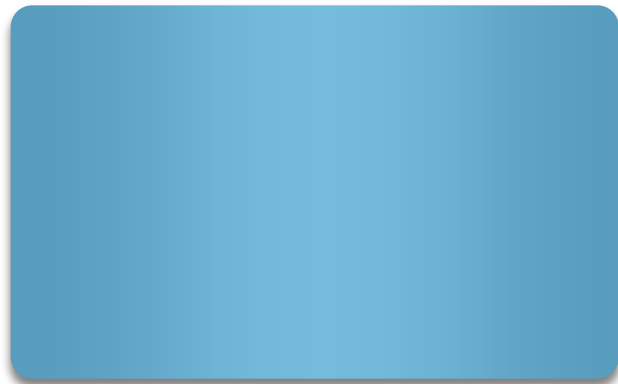
- First published in 1844. Yes 1844.
- Started current evolution after WW II
- Goal has always been to communicate within the field to better inform diagnosis and treatment planning.
- DSM V has been in process for 12 years
- Worked to better coincide with ICD 11 (DSM originally part of ICD).

# Diagnosis is transitional



As science and technology improve, criteria for diagnosis may change, become more clear.

# Overall changes



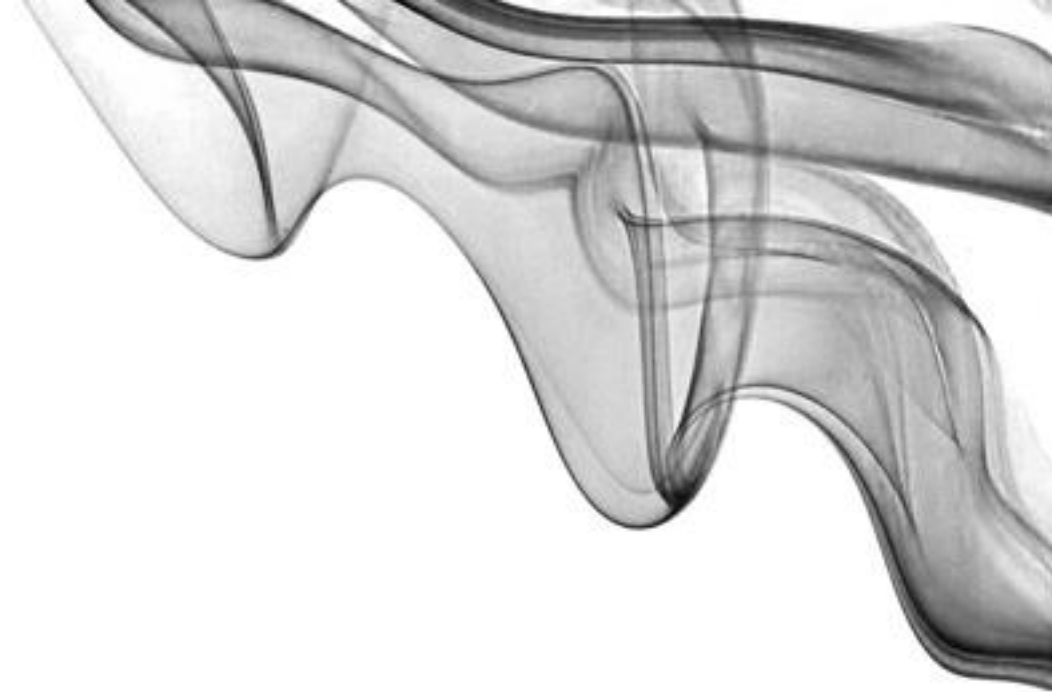
No  
multiaxial  
system



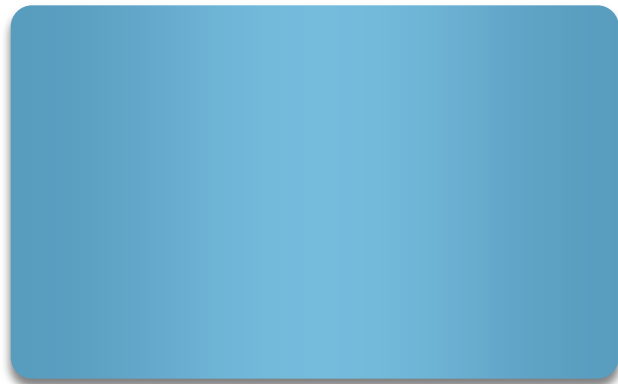
Spectrum &  
dimensional  
approach



Chapter  
organization



# Overall changes

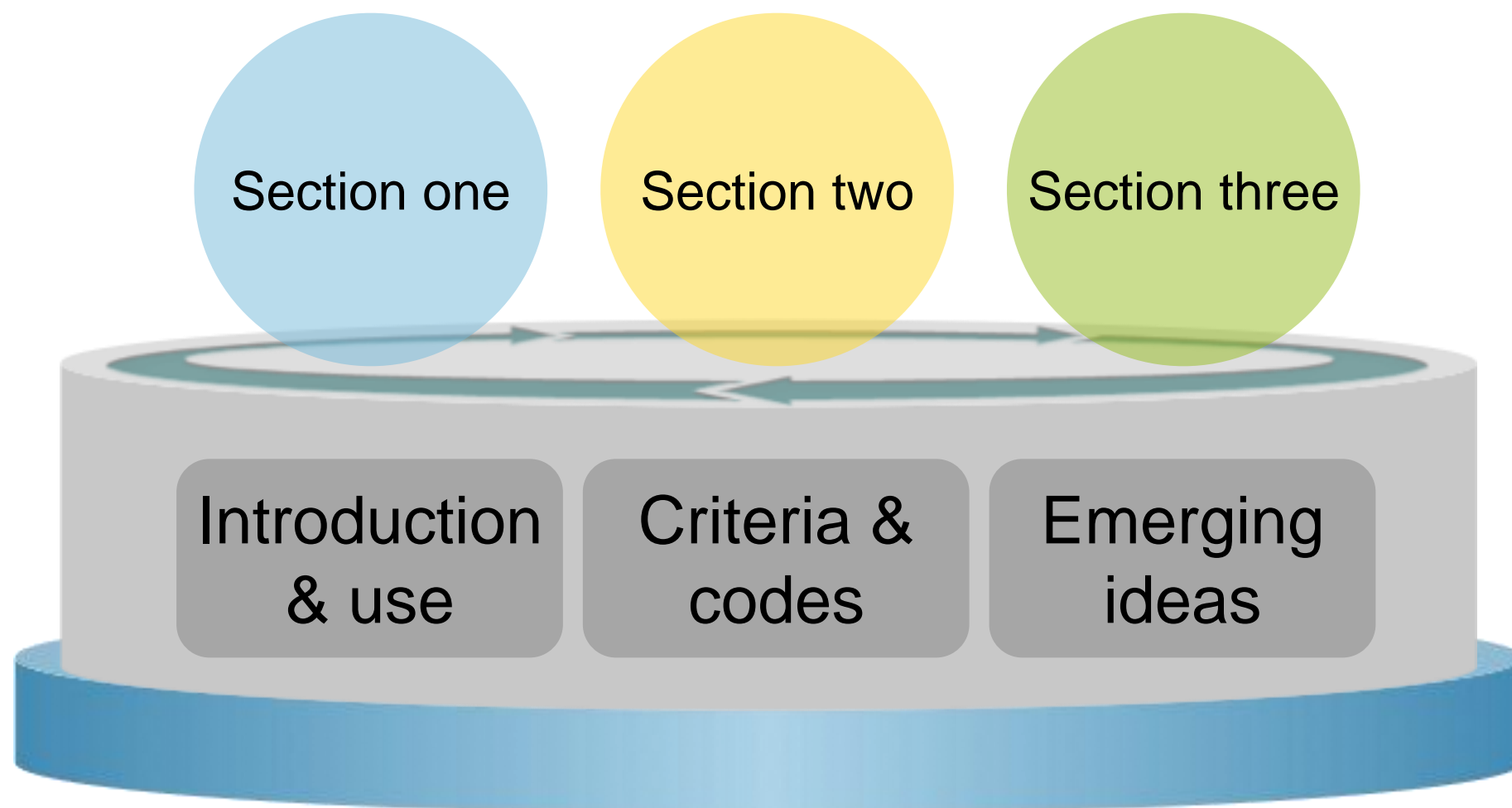


Recognition  
of age  
gender and  
culture



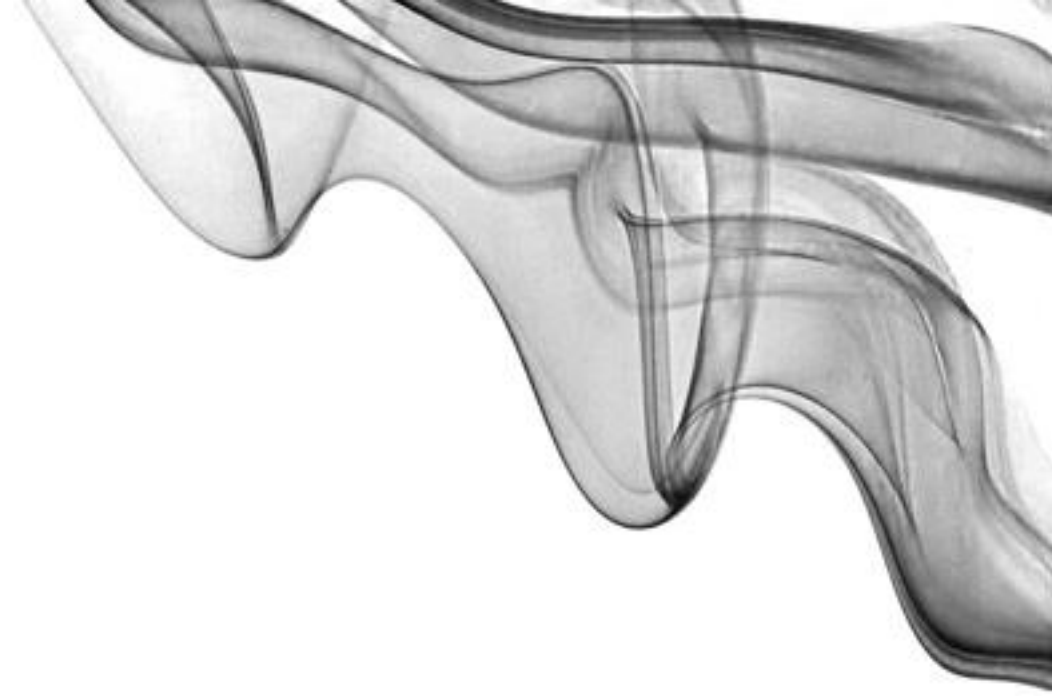
Harmony with  
ICD 11

# Organization of manual



# Within chapters

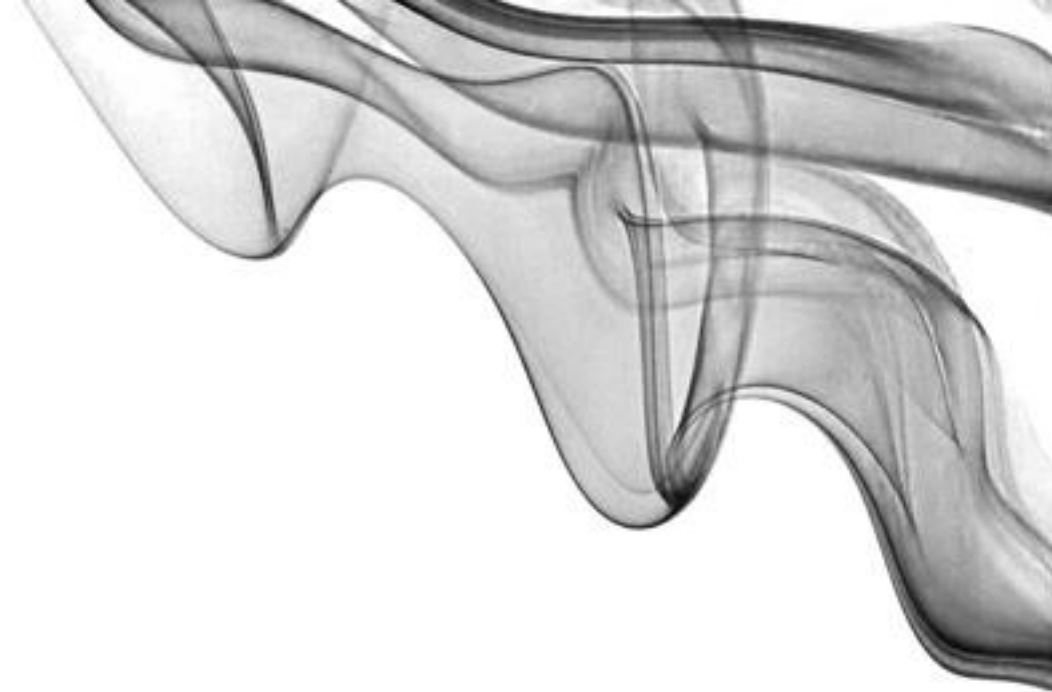
- Criteria for specific disorder
- subtypes & specifies
- coding
- Information
- Diagnostic features
- Associated features
- Prevalence
- Development & course

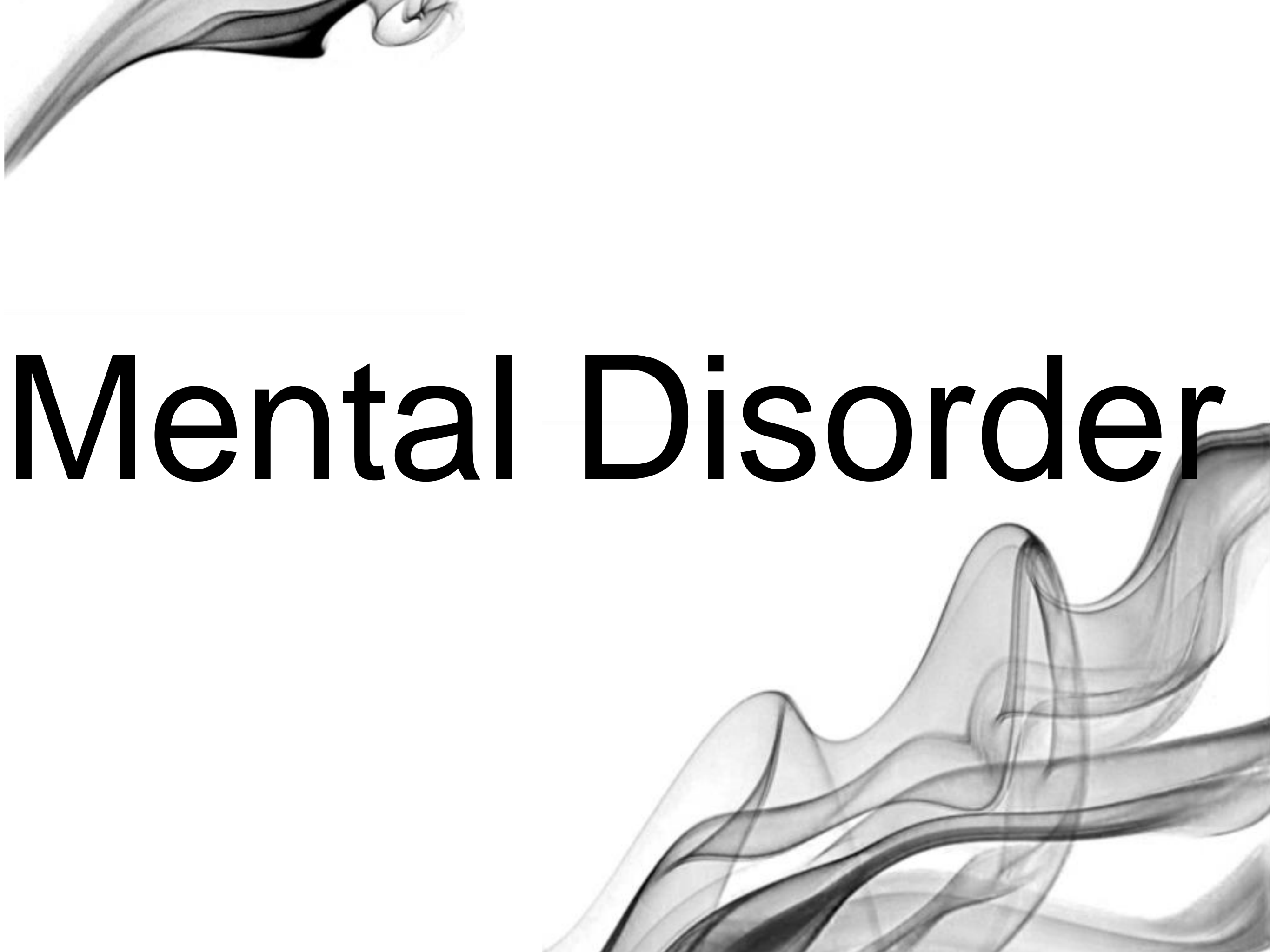




# Overview

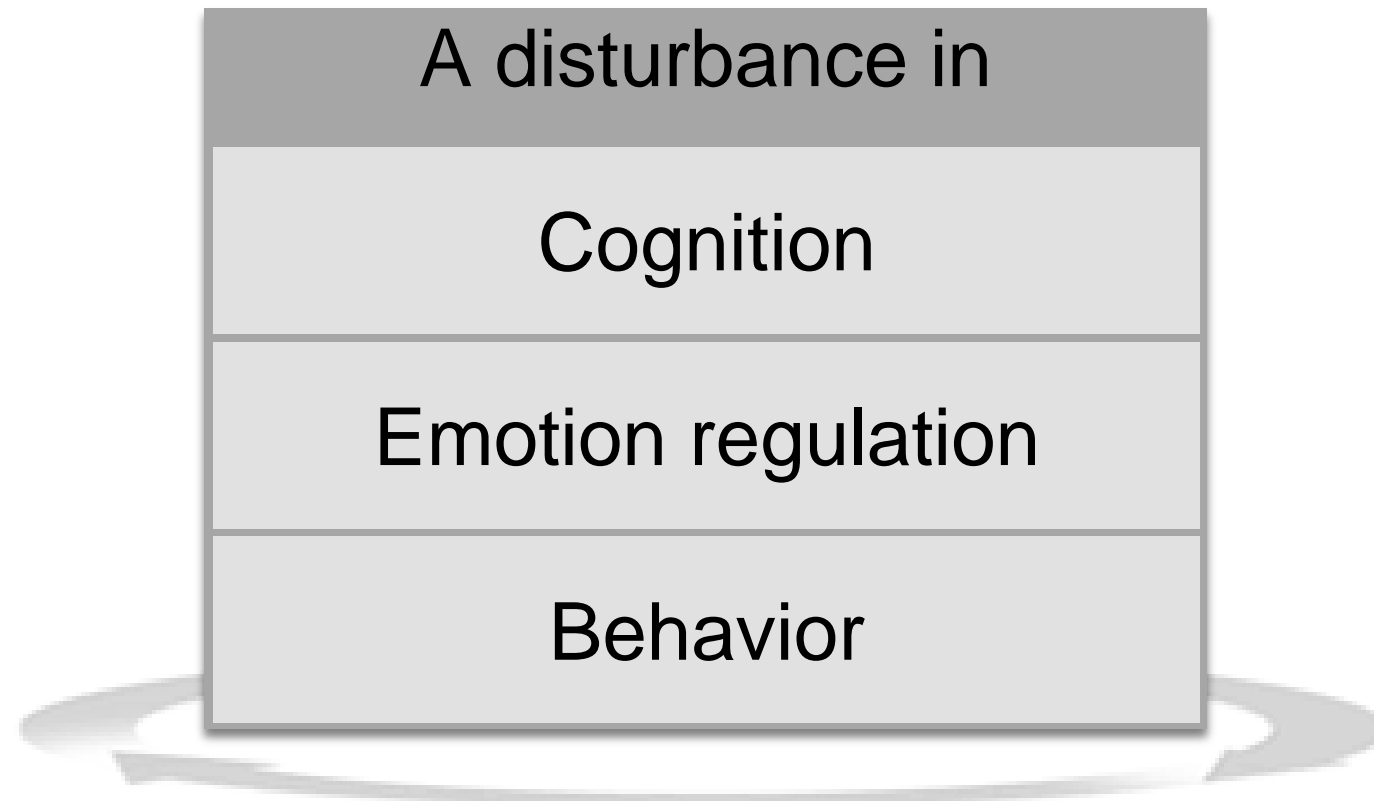
- Risk & prognostic factors
- Culture related issues
- Gender related issues
- Suicide risk
- Functional consequences
- Differential diagnosis
- Comorbidity



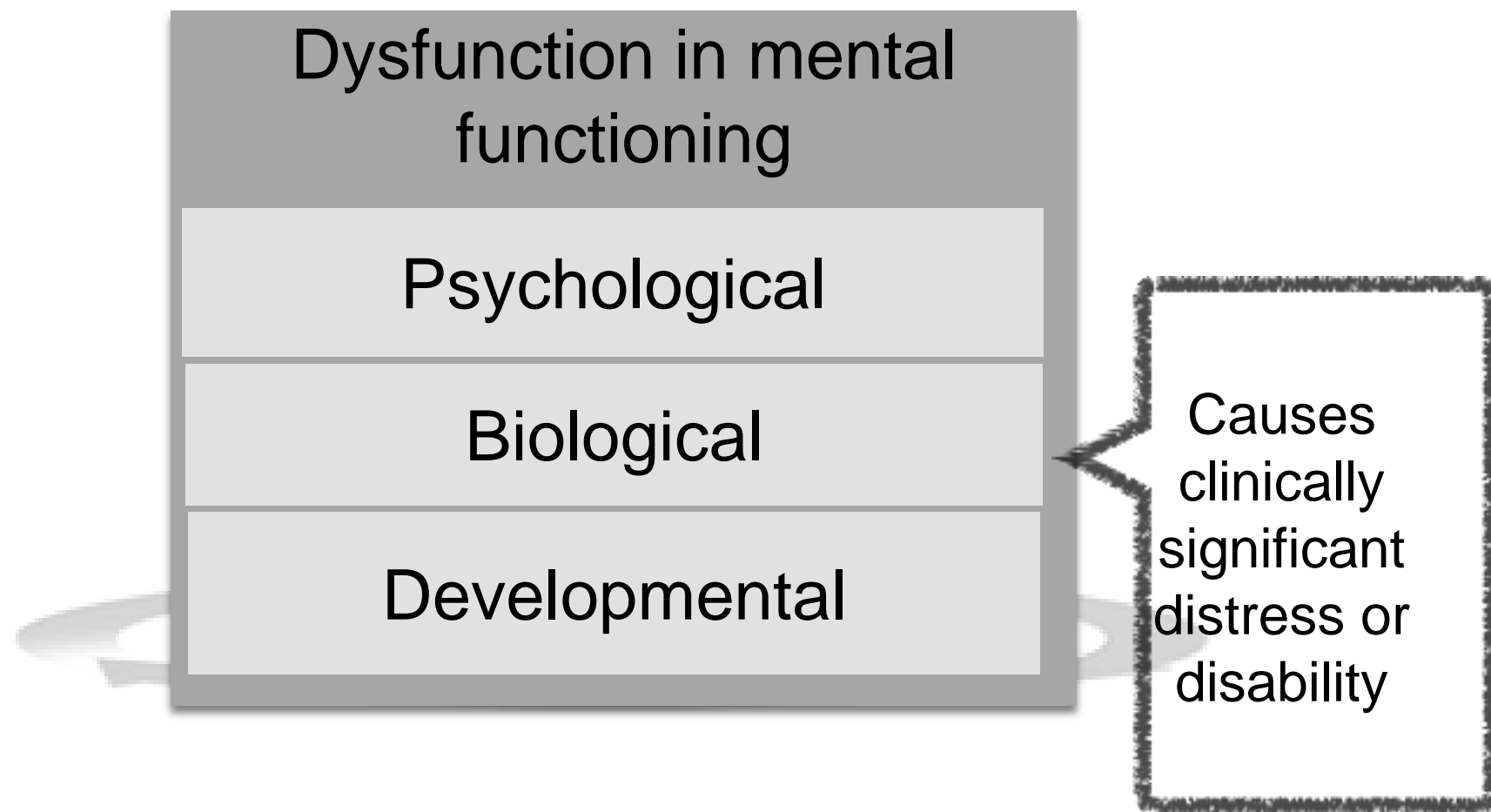


# Mental Disorder

# Inclusion criteria: syndromes



# Inclusion criteria: syndromes



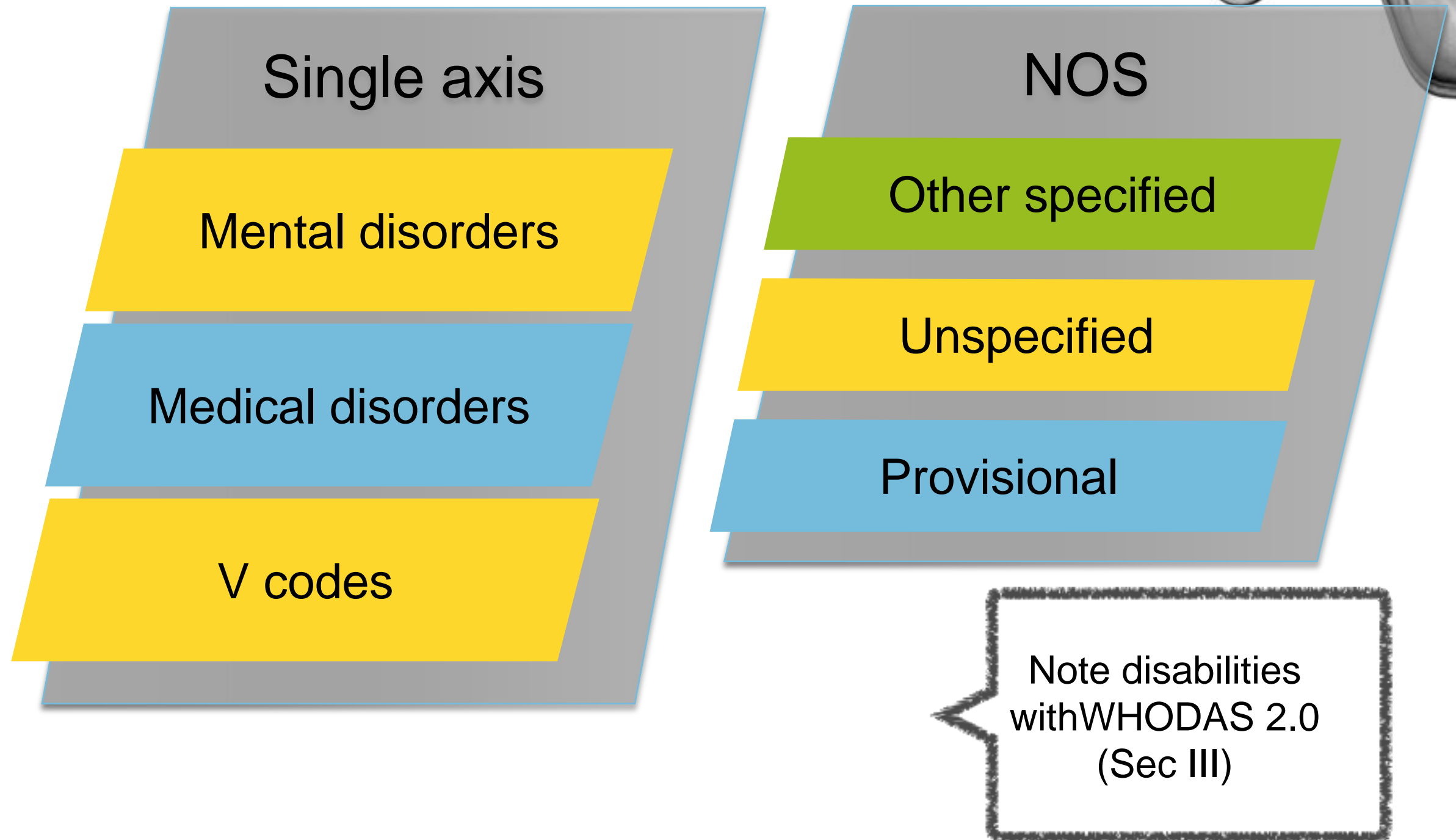
# Exclusion criteria:

More than

Culturally expected  
response to stressor

Socially deviant behavior

# Use of DSM V





# Samples

296.42 Bipolar Disorder, current episode manic,  
moderate severity, with anxious  
distress.

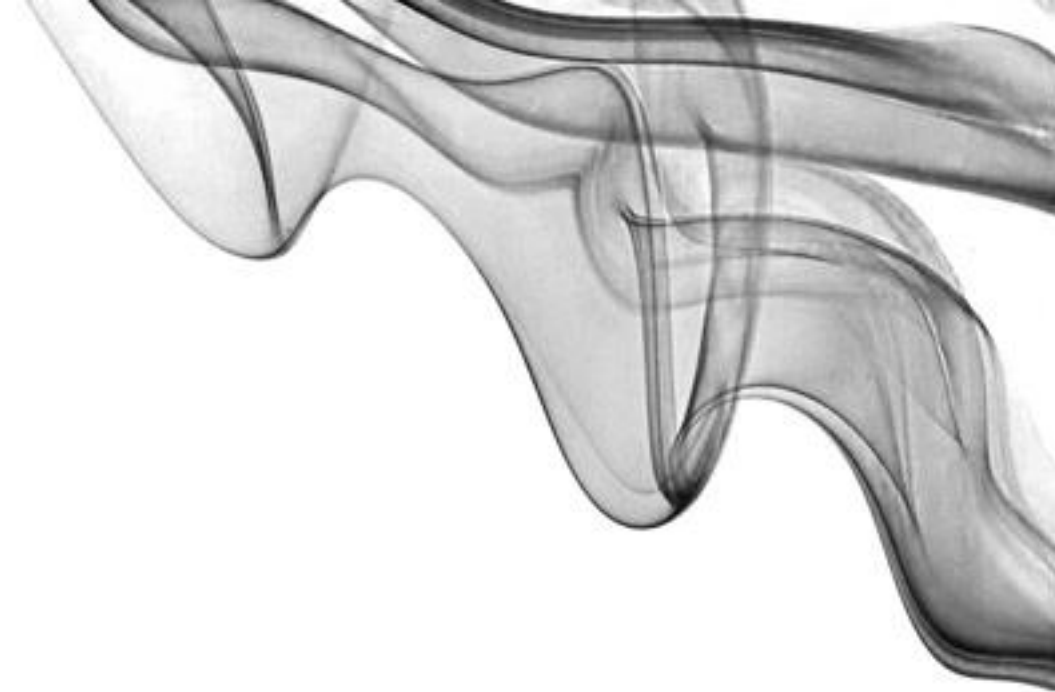
301.83 Borderline Personality Disorder

300.4 Persistent Depressive Disorder, mild  
severity, with melancholic features, with  
early onset, with pure dythymic  
syndrome

v61.03 Disruption of family by separation



# Neurodevelopmental Disorders 31



New chapter

Intellectual  
Disability, not  
MR

Communication  
d/o revised

Autism  
Spectrum

ADHD  
change

Research  
indicates these  
are all aspects of  
one disorder, a  
spectrum.



# Autism Spectrum Disorder

## 50

Combines 4 different disorders

Autistic  
disorder

Childhood  
Disintegrative  
Disorder

Pervasive  
Developmental  
Disorder NOS

Asperger's

Research  
indicates these  
are all aspects of  
one disorder, a  
spectrum.

# ADHD 59

- From some hyperactive ...before age 7 to several symptoms before age 12
- Allows comorbid diagnosis with autism spectrum
- Fewer symptoms required for adults
- Examples included

# ADHD symptoms in adults

- Inaccurate work, overlooking details
- Difficulty maintaining focus in meetings, meeting deadlines, managing sequential tasks
- Failing to finish tasks, work or home
- Forgetful about daily activities
- Often interrupts in social settings
- Uncomfortable being still

# Schizophrenia 99

- Schizophrenia spectrum
- Order reflects severity
- Catatonia can be specifier or diagnosis
- Schizoaffective disorder simplified
- Schizophrenia
  - Drops subtypes
  - Revised active phase criteria

# Bipolar & Related Disorders 123. Case example 10

- Bipolar and depressive disorders are in separate chapters
- Mixed episodes
- Increased activity listed as core feature of mania
- Specifiers
  - With mixed features
  - With anxious distress
  - With peripartum onset



# Types of mood episodes

- Manic: distinct period of elevated mood for at least a week, with 3 other manic symptoms, severe mood disturbance
- Hypomanic: elevated mood for at least a week, three other symptoms, observable to others, not severe
- Major Depressive Episode: five symptoms for at least two weeks

# Depressive Disorder 155

- Chronic depressive spectrum added
- Changes to major depression:  
eliminates bereavement exception,  
new specifiers

# Case study

- Mr. Jones came comes to you because feels unbelievably blue. For the past four weeks he has felt tired all the time and cries periodically throughout the day. He reports that he feels tired most of the time and spends most of his time at home alone. He has not been to work in some time and it is not clear if he will be allowed back. He believes himself to be a failure as a father because his son was recently arrested for possession of drugs. He reports that he has nor been able to sleep for weeks, waking up most nights at four am and is then unable to return to sleep. He reports "mornings are the worst". He had a similar episode about three years ago.



# Anxiety Disorders 189

- Panic and agoraphobia separated
- Panic attacks can be applied to any disorder
- GAD unchanged

# Obsessive compulsive and related disorders 235

- OCD

- Body Dysmorphic
- Hoarding disorder
- Trichotillomania
- Excoriation
- Medication induced OCD
- Due to a medical condition
- Other specified

- GAD unchanged

# Trauma & Stressor Related Disorders 265

- New chapter
- PTSD modified with new subtypes
- Acute stress modified

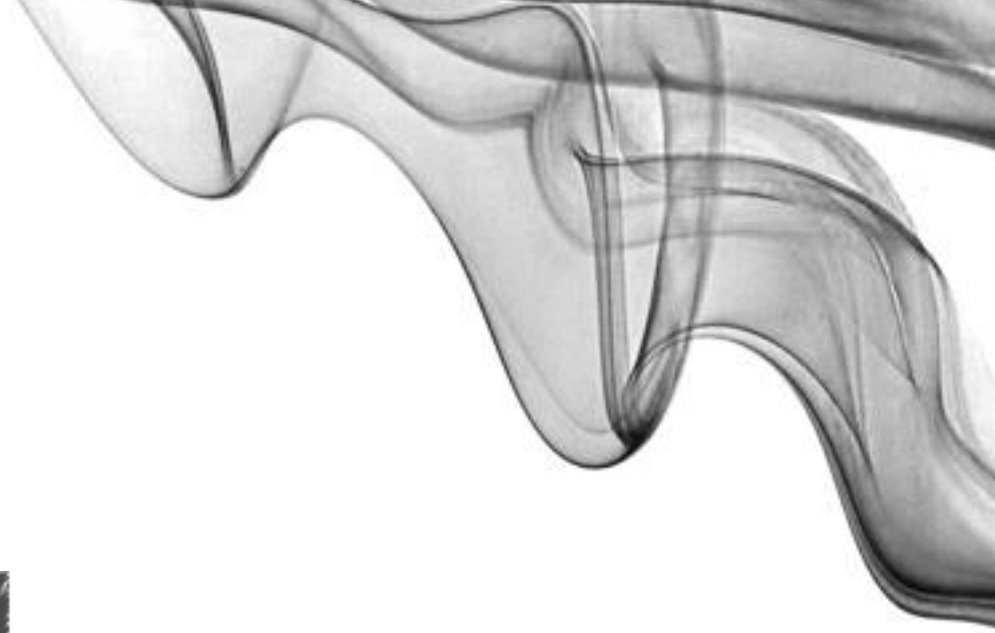
- Ms Allen is a 39 year old African American who comes in after witnessing the death of her friend about 5 weeks ago. The car they were traveling in was struck head on by a drunk driver, and her friend was thrown through the windshield. She attempted CPR on her friend at the scene, but the friend was declared dead when medics arrived. Since then Ms Allen has had two panic attacks, both occurred when she attempted to drive by herself. This has led to increased anxiety around driving, and having to be driven to work by family members. She experiences intrusive images of her friend's body at the scene. She is not sleeping well, and often has nightmares about the accident. Her husband reports that she seems "far away" and that she no longer engages in her normal activities, such as visiting friends and family, and sewing. Overall she seems irritated and easily angered.

# PTSD for Children six years and younger 272

- Separate criteria
- Same specifiers
- Fewer symptoms
- Same coding #, above narrative

# Feeding and Eating Disorders 329

- New title
- Avoidant/Restrictive food intake disorder added
- Anorexia & bulimia modified
- Binge eating disorder



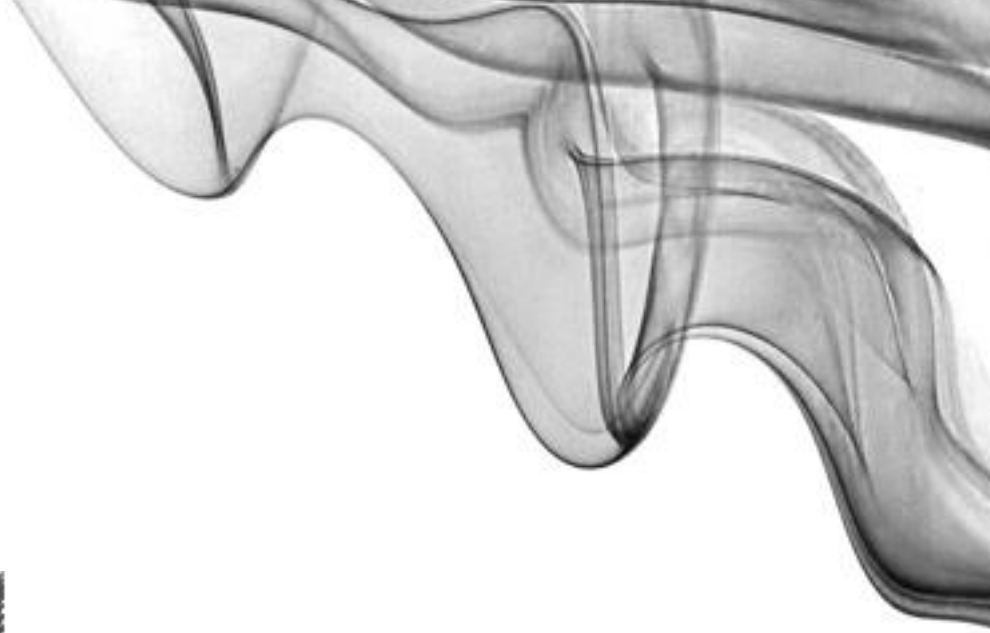
# Disruptive, impulse control and conduct disorders 461

- Reorganization of externalizing problems
- Refined criteria for ODD
- New specifiers for CD



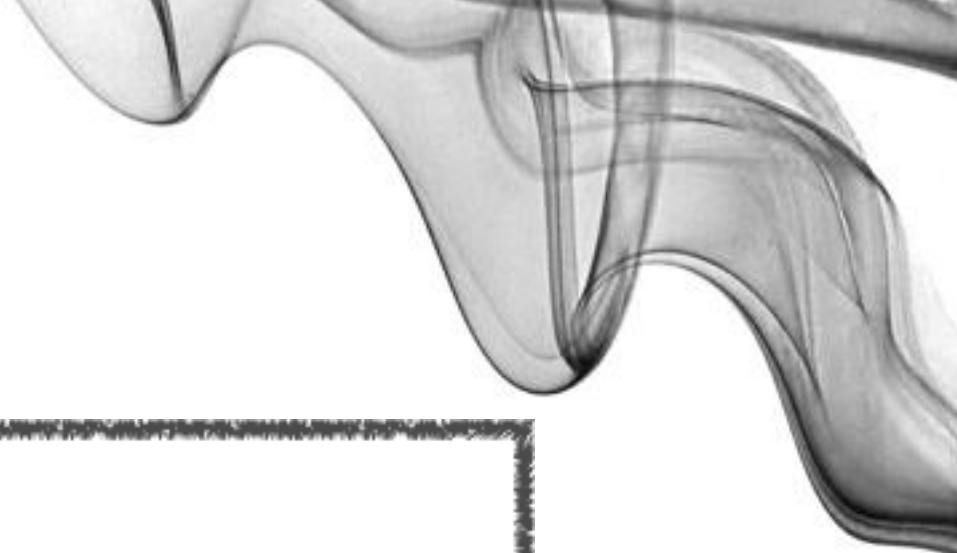
# Substance related and addictive disorders 481

- New title
- 2 types: substance use & substance induced
- Dependence & abuse combined





- David has a twelve year history of heavy drinking. In a typical day he drinks more than a fifth of vodka. If he attempts to cut down he experiences significant withdrawals. He does not work, and has no contact with family because his daily level of intoxication prohibits this. On three occasions he has tried to quit, but the longest period of sobriety was 3 days. He has recently been diagnosed with heart problems, but this has only changed his unwillingness to try to stop drinking.



# Substance categories

- Alcohol
- Caffeine
- Cannabis

- Hallucinogen
- Inhalants
- Opioids
- Sedatives/hypnotics/anxiolytics
- Stimulants
- Tobacco related
- Non-substance related (gambling)

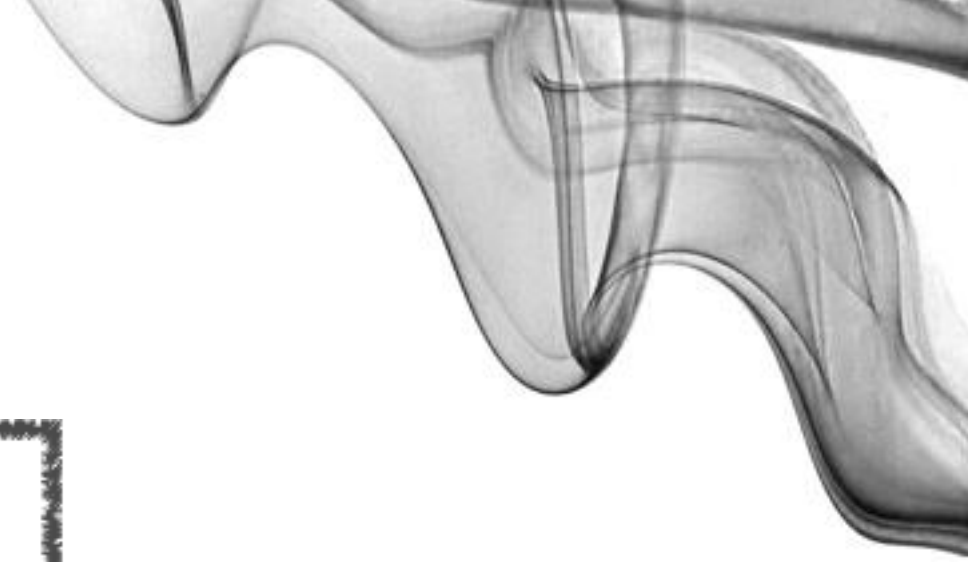
- 2 types: substance use & substance induced

Dependence & abuse are combined

# Nuerocognitive Disorders

## 591

- Forget dementia
- New category
- Major neurocog./minor neurocog.



# Personality Disorders 645

- New definitions
- Rating scales
- Reduction of subtypes from 10 to 6
- Trait rating system

# Clusters

- Odd/Eccentric
- Emotional/Erratic
- Anxious/Fearful
- Other

# Odd/Eccentric

Paranoid

Schizoid

Schizotypal



Emotional/Erratic

Narcissistic

Antisocial

Borderline

Histrionic





# Anxious/Fearful

Avoidant

Dependent

Obsessive-  
compulsive






# Other

Due to  
medical  
condition

Other  
specified

Other  
unspecified



The image features abstract, smoke-like patterns in the corners. In the top-left corner, a wispy trail of smoke curves downwards. In the bottom-right corner, a more complex, layered structure of smoke billows upwards. The central text is set against a plain white background.

**Q & A**